Case 16-02784 Doc 1 Filed 01/29/16 Entered 01/29/16 15:02:24 Desc Main Document Page 1 of 58

| Fill in this information to identify your case: |                               |                               |
|---|-------------------------------|-------------------------------|
| United States Bankruptcy Court for the:         |                               |                               |
| NORTHERN DISTRICT OF ILLINOIS                   |                               |                               |
| Case number (if known)                          | Chapter you are filing under: |                               |
|   | ☐ Chapter 7                   |                               |
|   | ☐ Chapter 11                  |                               |
|   | ☐ Chapter 12                  |                               |
|   | ■ Chapter 13                  | ☐ Check if this amended filir |

### Official Form 101

# **Voluntary Petition for Individuals Filing for Bankruptcy**

12/15

1/29/16 11:33AM

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

| Pa | rt 1: Identify Yourself  |   |     |   |
|----|--|---|-----|---|
|    |  | About Debtor 1:   | Abo | out Debtor 2 (Spouse Only in a Joint Case): |
| 1. | Your full name   |   |     |   |
|    | Write the name that is on your government-issued picture identification (for example, your driver's license or passport).  Bring your picture identification to your | Demetria First name  C. Middle name  Dudley  Last name and Suffix (Sr., Jr., II, III) | Mid | Idle name                                   |
|    | meeting with the trustee.  | Last name and Guilly (Gr., Gr., II, III)  | Las | it name and damx (dr., dr., ii, iii)        |
| 2. | All other names you have used in the last 8 years  | •   |     |   |
|    | Include your married or maiden names.  |   |     |   |
| 3. | Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)  | xxx-xx-8368   |     |   |

Page 2 of 58 Document

Debtor 1 Demetria C. Dudley

|    |   | About Debtor 1:  |   | About Debtor 2 (Spouse Only in a Joint Case):   |
|----|---|--|---|---|
| 4. | Any business names and<br>Employer Identification<br>Numbers (EIN) you have<br>used in the last 8 years<br>Include trade names and<br>doing business as names | ■ I have not used any business name or EINs.  Business name(s)  EINs   | - | ☐ I have not used any business name or EINs.  Business name(s)  EINs  |
| 5. | Where you live  | 4123 Lindenwood Dr<br>Apt. 2SW   |   | If Debtor 2 lives at a different address:   |
|    |   | Matteson, IL 60443 Number, Street, City, State & ZIP Code  Cook  |   | Number, Street, City, State & ZIP Code  |
|    |   | County  If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.  |   | County  If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.  |
|    |   | Number, P.O. Box, Street, City, State & ZIP Code   | _ | Number, P.O. Box, Street, City, State & ZIP Code  |
| 6. | Why you are choosing this district to file for bankruptcy   | <ul> <li>Check one:</li> <li>■ Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.</li> <li>□ I have another reason.         Explain. (See 28 U.S.C. § 1408.)     </li> </ul> |   | Check one:  Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.  I have another reason. Explain. (See 28 U.S.C. § 1408.) |

1/29/16 11:33AM

Case number (if known)

Case 16-02784 Doc 1 Filed 01/29/16 Entered 01/29/16 15:02:24 Desc Main Document Page 3 of 58

| Deb                       | otor 1 Demetria C. Dudle  | <del>y</del>  |                               |  |                         | Case r                                    | number (if known)                              |  |
|---------------------------|---|---|-------------------------------|--|-------------------------|---|--|--|
|                           |   |   |                               |  |                         |   |  |  |
| Par                       | Tell the Court About  | Your Ban  | kruptcy Ca                    | ase  |                         |   |  |  |
| 7.                        | The chapter of the Bankruptcy Code you are  | Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)). Also, go to the top of page 1 and check the appropriate box. |                               |  |                         |   |  |  |
|                           | choosing to file under  | ☐ Chap  | pter 7                        |  |                         |   |  |  |
|                           |   | ☐ Chap  | pter 11                       |  |                         |   |  |  |
|                           |   | ☐ Chap  | pter 12                       |  |                         |   |  |  |
|                           |   | ■ Chap  | pter 13                       |  |                         |   |  |  |
| 8.                        | How you will pay the fee  | ab<br>or  | oout how yo                   | e entire fee when I file my pour may pay. Typically, if you a attorney is submitting your p address. | are paying              | the fee yourself,                         | you may pay with cas                           | h, cashier's check, or money                                 |
|                           |   |   |                               | y the fee in installments. If y  |                         | e this option, sigr                       | n and attach the Applic                        | cation for Individuals to Pay                                |
|                           |   |   | J                             | ee in Installments (Official For<br>at my fee be waived (You ma                                      | ,                       | this option only                          | if you are filing for Cha                      | nter 7. By law, a judge may                                  |
|                           |   | bu<br>th  | ut is not req<br>at applies t | uired to, waive your fee, and<br>o your family size and you ar<br>cation to Have the Chapter 7       | may do se<br>e unable t | o only if your inco<br>o pay the fee in i | ome is less than 150% nstallments). If you cho | of the official poverty line bose this option, you must fill |
| 9. Have you filed for No. |   |   |                               |  |                         |   |  |  |
|                           | bankruptcy within the last 8 years?   | Yes.  |                               |  |                         |   |  |  |
|                           |   |   | District                      | Northern District of<br>Illinois, Eastern<br>Division  | When                    | 9/03/15                                   | Case number                                    | 15-30346   |
|                           |   |   | District                      | DIVISION   | When                    |   | Case number                                    |  |
|                           |   |   | District                      |  | When                    | -   | Case number                                    |  |
|                           |   |   |                               |  | _                       |   |  |  |
| 10.                       | Are any bankruptcy cases pending or being   | ■ No  |                               |  |                         |   |  |  |
|                           | filed by a spouse who is<br>not filing this case with<br>you, or by a business<br>partner, or by an<br>affiliate? | ☐ Yes.  |                               |  |                         |   |  |  |
|                           |   |   | Debtor                        |  |                         |   | Relationship to y                              | /ou  |
|                           |   |   | District                      |  | _ When                  |   | Case number, if                                | known  |
|                           |   |   | Debtor                        |  |                         |   | Relationship to y                              | ·  |
|                           |   |   | District                      |  | When                    |   | Case number, if                                | known  |
| 11.                       | Do you rent your  | □ No.   | Go to I                       | ine 12.  |                         |   |  |  |
|                           | residence?  | Yes.  | Has yo                        | our landlord obtained an evict   | ion judgm               | ent against you a                         | and do you want to stay                        | in your residence?   |
|                           |   |   |                               | No. Go to line 12.   |                         |   |  |  |
|                           |   |   |                               | Yes. Fill out <i>Initial Statemer</i> bankruptcy petition.   | nt About a              | า Eviction Judgm                          | ent Against You (Form                          | 101A) and file it with this                                  |

Case 16-02784 Doc 1 Filed 01/29/16 Entered 01/29/16 15:02:24 Desc Main Document Page 4 of 58

1/29/16 11:33AM Debtor 1 Demetria C. Dudley Case number (if known) Part 3: Report About Any Businesses You Own as a Sole Proprietor 12. Are you a sole proprietor of any full- or part-time No. Go to Part 4. business? Name and location of business ☐ Yes. A sole proprietorship is a business you operate as Name of business, if any an individual, and is not a separate legal entity such as a corporation, partnership, or LLC. Number, Street, City, State & ZIP Code If you have more than one sole proprietorship, use a separate sheet and attach it to this petition. Check the appropriate box to describe your business: Health Care Business (as defined in 11 U.S.C. § 101(27A)) Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) Stockbroker (as defined in 11 U.S.C. § 101(53A)) Commodity Broker (as defined in 11 U.S.C. § 101(6)) None of the above 13. Are you filing under If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate Chapter 11 of the deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of **Bankruptcy Code and are** operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure you a small business in 11 U.S.C. 1116(1)(B). debtor? I am not filing under Chapter 11. No. For a definition of small business debtor, see 11 I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy ■ No. U.S.C. § 101(51D). I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code. ☐ Yes. Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention Part 4: 14. Do you own or have any No. property that poses or is alleged to pose a threat ☐ Yes. What is the hazard? of imminent and identifiable hazard to public health or safety? Or do you own any If immediate attention is property that needs needed, why is it needed? immediate attention? For example, do you own perishable goods, or livestock that must be fed, Where is the property? or a building that needs

Number, Street, City, State & Zip Code

urgent repairs?

Case 16-02784 Doc 1 Filed 01/29/16 Entered 01/29/16 15:02:24 Desc Main 1/29/16 11:33AM Page 5 of 58 Document Debtor 1 Demetria C. Dudley Case number (if known) Part 5: Explain Your Efforts to Receive a Briefing About Credit Counseling About Debtor 1: About Debtor 2 (Spouse Only in a Joint Case): 15. Tell the court whether You must check one: You must check one: you have received a I received a briefing from an approved credit I received a briefing from an approved credit briefing about credit counseling agency within the 180 days before I counseling agency within the 180 days before I filed filed this bankruptcy petition, and I received a counseling. this bankruptcy petition, and I received a certificate of certificate of completion. completion. The law requires that you Attach a copy of the certificate and the payment Attach a copy of the certificate and the payment plan, if receive a briefing about plan, if any, that you developed with the agency. any, that you developed with the agency. credit counseling before you file for bankruptcy. I received a briefing from an approved credit I received a briefing from an approved credit You must truthfully check counseling agency within the 180 days before I counseling agency within the 180 days before I filed one of the following filed this bankruptcy petition, but I do not have this bankruptcy petition, but I do not have a choices. If you cannot do a certificate of completion. certificate of completion. so, you are not eligible to Within 14 days after you file this bankruptcy Within 14 days after you file this bankruptcy petition, you petition, you MUST file a copy of the certificate and MUST file a copy of the certificate and payment plan, if If you file anyway, the court payment plan, if any. anv. can dismiss your case, you will lose whatever filing fee I certify that I asked for credit counseling I certify that I asked for credit counseling services you paid, and your services from an approved agency, but was from an approved agency, but was unable to obtain creditors can begin unable to obtain those services during the 7 those services during the 7 days after I made my collection activities again. days after I made my request, and exigent request, and exigent circumstances merit a 30-day circumstances merit a 30-day temporary waiver temporary waiver of the requirement. of the requirement. To ask for a 30-day temporary waiver of the requirement, To ask for a 30-day temporary waiver of the attach a separate sheet explaining what efforts you made requirement, attach a separate sheet explaining to obtain the briefing, why you were unable to obtain it what efforts you made to obtain the briefing, why before you filed for bankruptcy, and what exigent you were unable to obtain it before you filed for circumstances required you to file this case. bankruptcy, and what exigent circumstances Your case may be dismissed if the court is dissatisfied required you to file this case. with your reasons for not receiving a briefing before you Your case may be dismissed if the court is filed for bankruptcy. dissatisfied with your reasons for not receiving a If the court is satisfied with your reasons, you must still briefing before you filed for bankruptcy. receive a briefing within 30 days after you file. You must If the court is satisfied with your reasons, you must file a certificate from the approved agency, along with a still receive a briefing within 30 days after you file. copy of the payment plan you developed, if any. If you do You must file a certificate from the approved not do so, your case may be dismissed.

agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 davs.

I am not required to receive a briefing about credit counseling because of:

|        | Incapacity.      | I have a mental illness or a<br>mental deficiency that makes<br>me incapable of realizing or<br>making rational decisions<br>about finances.                                    |
|--------|------------------|---|
|        | Disability.      | My physical disability causes<br>me to be unable to participate<br>in a briefing in person, by<br>phone, or through the<br>internet, even after I<br>reasonably tried to do so. |
|        | Active duty.     | I am currently on active military duty in a military combat zone.   |
| briefi | ing about credit | e not required to receive a<br>counseling, you must file a<br>credit counseling with the  |

court.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days. I am not required to receive a briefing about credit counseling because of: Incapacity. I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances. Disability. My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

> **Active duty.** I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver

of credit counseling with the court.

Case 16-02784 Doc 1 Filed 01/29/16 Entered 01/29/16 15:02:24 Desc Main Document Page 6 of 58

| Deb  | tor 1 <b>Demetria C. Dudle</b>  | <b>Э</b> у                |  | Case number   | er (if known)  |  |  |  |
|--|---|---------------------------|--|---|--|--|--|--|
| Part   | 6: Answer These Quest   | ions for Repo             | orting Purposes  |   |  |  |  |  |
| 16.  | What kind of debts do you have?   | 16a. Ai                   | re your debts primarily co<br>dividual primarily for a perso   | nsumer debts? Consumer debts are definently or household purpose."                            | ned in 11 U.S.C. § 101(8) as "incurred by an                                       |  |  |  |
|  |   |                           | □ No. Go to line 16b.  |   |  |  |  |  |
|  |   |                           | Yes. Go to line 17.  |   |  |  |  |  |
|  |   |                           | <b>Are your debts primarily business debts?</b> <i>Business debts</i> are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. |   |  |  |  |  |
|  |   |                           | No. Go to line 16c.  |   |  |  |  |  |
|  |   |                           | Yes. Go to line 17.  |   |  |  |  |  |
|  |   | 16c. St                   | tate the type of debts you or  | we that are not consumer debts or busine  | ss debts   |  |  |  |
| 17.  | Are you filing under Chapter 7?   | ■ No.                     | am not filing under Chapter  | 7. Go to line 18.   |  |  |  |  |
| Do you estimate that<br>after any exempt<br>property is excluded and |   |                           |  | To you estimate that after any exempt propulation will be available to distribute to unsecure |  |  |  |  |
|  | administrative expenses   |                           | l No   |   |  |  |  |  |
|  | are paid that funds will<br>be available for<br>distribution to unsecured<br>creditors? |                           | l Yes  |   |  |  |  |  |
| 18.  | How many Creditors do you estimate that you owe?  | <b>1</b> -49              |  | □ 1,000-5,000   | □ 25,001-50,000  |  |  |  |
|  |   | □ 50-99                   |  | <b>5001-10,000</b>  | ☐ 50,001-100,000   |  |  |  |
|  |   | □ 100-199<br>□ 200-999    |  | □ 10,001-25,000   | ☐ More than100,000   |  |  |  |
| 19.  | How much do you   | <b>\$0 - \$50</b> ,       | 000  | ☐ \$1,000,001 - \$10 million  | ☐ \$500,000,001 - \$1 billion  |  |  |  |
|  | estimate your assets to be worth?   | □ \$50,001                |  | □ \$10,000,001 - \$50 million   | ☐ \$1,000,000,001 - \$10 billion   |  |  |  |
|  | DO WORLD  | □ \$100,001               |  | ☐ \$50,000,001 - \$100 million  | ☐ \$10,000,000,001 - \$50 billion  |  |  |  |
|  |   | □ \$500,001               | - \$1 million  | ☐ \$100,000,001 - \$500 million   | ☐ More than \$50 billion   |  |  |  |
| 20.  | How much do you   | □ \$0 - \$50.             | 000  | ☐ \$1,000,001 - \$10 million  | ☐ \$500,000,001 - \$1 billion  |  |  |  |
|  | estimate your liabilities to be?  | \$50,001                  |  | ☐ \$10,000,001 - \$50 million   | □ \$1,000,000,001 - \$10 billion   |  |  |  |
|  | to be:  | □ \$100,001               |  | ☐ \$50,000,001 - \$100 million  | □ \$10,000,000,001 - \$50 billion  |  |  |  |
|  |   | □ \$500,001 - \$1 million |  | □ \$100,000,001 - \$500 million   | ☐ More than \$50 billion   |  |  |  |
| Part   | 7: Sign Below   |                           |  |   |  |  |  |  |
| For  | you   | I have exam               | ined this petition, and I dec  | lare under penalty of perjury that the infor  | mation provided is true and correct.   |  |  |  |
|  |   |                           |  | , I am aware that I may proceed, if eligible<br>elief available under each chapter, and I c   | e, under Chapter 7, 11,12, or 13 of title 11,<br>hoose to proceed under Chapter 7. |  |  |  |
|  |   |                           |  | not pay or agree to pay someone who is no<br>e notice required by 11 U.S.C. § 342(b).         | ot an attorney to help me fill out this  |  |  |  |
|  |   | I request rel             | ief in accordance with the c   | hapter of title 11, United States Code, spe   | ecified in this petition.  |  |  |  |
|  |   | bankruptcy of 1519, and 3 | case can result in fines up t<br>571.  | concealing property, or obtaining money o \$250,000, or imprisonment for up to 20             |  |  |  |  |
|  |   | Demetria ( Signature of   |  | Signature of Debto  | r 2  |  |  |  |
|  |   | Executed or               |  | Executed on   |  |  |  |  |
|  |   |                           | MM / DD / YYYY   | MM  | I / DD / YYYY  |  |  |  |

Case 16-02784 Doc 1 Filed 01/29/16 Entered 01/29/16 15:02:24 Desc Main Document Page 7 of 58

| Debtor 1 Demetria C. Dudlo  | <b>Э</b> у  | Cas                            | se number (if known)  |
|---|---|--------------------------------|---|
| For your attorney, if you are represented by one                              | under Chapter 7, 11, 12, or 13 of title 11, United  | ed States Code, and have e     | e informed the debtor(s) about eligibility to proceed explained the relief available under each chapter |
| If you are not represented by an attorney, you do not need to file this page. | for which the person is eligible. I also certify to 342(b) and, in a case in which § 707(b)(4)(D) in the schedules filed with the petition is income. | applies, certify that I have r | no knowledge after an inquiry that the information  |
|   | /s/ Glenda J. Gray Signature of Attorney for Debtor   | Date                           | January 29, 2016<br>MM / DD / YYYY  |
|   | Glenda J. Gray Printed name   |                                |   |
|   | Law Office of Glenda J. Gray Firm name  |                                |   |
|   | 223 West Jackson, Suite 1116 Chicago, IL 60606 Number, Street, City, State & ZIP Code   |                                |   |
|   | Contact phone (312) 386-1010  | Email address                  | ladylawgray@gmail.com   |
|   | <b>06185507</b> Bar number & State  |                                | <u> </u>  |

Case 16-02784 Doc 1 Filed 01/29/16 Entered 01/29/16 15:02:24 Desc Main Page 8 of 58 Document

| Fill in this infor  | mation to identify your  | case:             |             |                                      |
|---------------------|--------------------------|-------------------|-------------|--------------------------------------|
| Debtor 1            | Demetria C. Dudl         | ey                |             |                                      |
|                     | First Name               | Middle Name       | Last Name   |                                      |
| Debtor 2            |                          |                   |             |                                      |
| (Spouse if, filing) | First Name               | Middle Name       | Last Name   |                                      |
| United States Ba    | ankruptcy Court for the: | NORTHERN DISTRICT | OF ILLINOIS |                                      |
| Case number         |                          |                   |             |                                      |
| (if known)          |                          |                   |             | ☐ Check if this is an amended filing |

## Official Form 106Sum

### Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

| info | s complete and accurate as possible. If two married people are filing together, both are equally responsible formation. Fill out all of your schedules first; then complete the information on this form. If you are filing amend original forms, you must fill out a new <i>Summary</i> and check the box at the top of this page. |                    |                             |
|------|---|--------------------|-----------------------------|
| Par  | 1: Summarize Your Assets  |                    |                             |
|      |   | Your as<br>Value o | sets<br>f what you own      |
| 1.   | Schedule A/B: Property (Official Form 106A/B)  1a. Copy line 55, Total real estate, from Schedule A/B   | \$                 | 0.00                        |
|      | 1b. Copy line 62, Total personal property, from Schedule A/B  | \$                 | 16,841.97                   |
|      | 1c. Copy line 63, Total of all property on Schedule A/B   | \$                 | 16,841.97                   |
| Par  | 2: Summarize Your Liabilities   |                    |                             |
|      |   | Your lia           | <b>abilities</b><br>you owe |
| 2.   | Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D)  2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D  | \$                 | 24,008.99                   |
| 3.   | Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F   | \$                 | 211.38                      |
|      | 3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F   | \$                 | 38,851.98                   |
|      | Your total liabilities  | \$                 | 63,072.35                   |
| Par  | 3: Summarize Your Income and Expenses   |                    |                             |
| 4.   | Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I   | \$                 | 2,575.56                    |
| 5.   | Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J   | \$                 | 1,982.90                    |
| Par  | 4: Answer These Questions for Administrative and Statistical Records  |                    |                             |
| 6.   | Are you filing for bankruptcy under Chapters 7, 11, or 13?  No. You have nothing to report on this part of the form. Check this box and submit this form to the court with yo   | ur other sc        | hedules.                    |
| 7.   | Yes What kind of debt do you have?  |                    |                             |
|      | Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.   | a personal,        | family, or                  |
|      | Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this  | box and s          | ubmit this form to          |

Entered 01/29/16 15:02:24 Desc Main Case 16-02784 Doc 1 Filed 01/29/16

Page 9 of 58 Document

| • | • |         |         |
|---|---|---------|---------|
|   |   | 1/29/16 | 11:33AM |

| Debtor 1 | Demetria C. Dudley                   | Case number (if known) |  |
|----------|--------------------------------------|------------------------|--|
|          | the court with your other schedules. |                        |  |

From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.

4,274.28

Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

| From Part 4 on Schedule E/F, copy the following:   | Tota | l claim |
|--|------|---------|
| 9a. Domestic support obligations (Copy line 6a.)   | \$_  | 0.00    |
| 9b. Taxes and certain other debts you owe the government. (Copy line 6b.)  | \$_  | 211.38  |
| 9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)  | \$_  | 0.00    |
| 9d. Student loans. (Copy line 6f.)   | \$_  | 0.00    |
| 9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.) | \$_  | 0.00    |
| 9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)                                       | +\$_ | 0.00    |
| 9g. <b>Total.</b> Add lines 9a through 9f.   | \$   | 211.38  |

Document Page 10 of 58

| preserved by the second of the | Middle Name  Middle Name  NORTHERN DISTRICT OF ILLI  | n asset fits in more than or<br>ling together, both are equ<br>litional pages, write your n<br>n or Have an Interest In<br>land, or similar property?  | ially responsible for supplying ame and case number (if known and case | ng correct information. If own). Answer every question  |
|--|--|--|--|---|
| rst Name rst Name rst Name ptcy Court for the:  106A/B VB: Proportely list and describe ete and accurate as pettach a separate shee Residence, Building, any legal or equitable in property? Vehicles r have legal or equitable for you lease a vehicle.   | Middle Name  Middle Name  NORTHERN DISTRICT OF ILLI  Private items. List an asset only once. If an ossible. If two married people are fit to this form. On the top of any add Land, or Other Real Estate You Ow interest in any residence, building, I itable interest in any vehicles, e, also report it on Schedule G: E | Last Name  NOIS  n asset fits in more than or ling together, both are equilitional pages, write your n or Have an Interest In land, or similar property?   | ially responsible for supplying ame and case number (if known and case | amended filing  12/15  the category where you thinling correct information. If own). Answer every question  |
| 106A/B A/B: Proportely list and describe ete and accurate as petrach a separate shee Residence, Building, any legal or equitable in property?  Vehicles  r have legal or equification or equitable in the separate shee experience.  | Prty  items. List an asset only once. If an ossible. If two married people are fit to this form. On the top of any add Land, or Other Real Estate You Ow interest in any residence, building, I itable interest in any vehicles, e, also report it on Schedule G: E  | Last Name  NOIS  n asset fits in more than or ling together, both are equilitional pages, write your n or Have an Interest In land, or similar property?   | ially responsible for supplying ame and case number (if known and case | amended filing  12/15  the category where you thinling correct information. If own). Answer every question  |
| 106A/B  VB: Proportely list and describe ete and accurate as petrach a separate shee Residence, Building, any legal or equitable in property?  Vehicles  r have legal or equitable in the separate shee etermines and accurate as petrach as period and accurate as petrach as period accurate as petrach as period accurate accurate as period accurate acc | erty  items. List an asset only once. If an ossible. If two married people are fit to this form. On the top of any add Land, or Other Real Estate You Ow interest in any residence, building, I  | n asset fits in more than or ling together, both are equ litional pages, write your n or Have an Interest In land, or similar property?  | ially responsible for supplying ame and case number (if known and case | amended filing  12/15  the category where you thinling correct information. If own). Answer every question  |
| 106A/B  VB: Proportion  tely list and describe ete and accurate as pittach a separate shee Residence, Building, any legal or equitable in property?  Vehicles  r have legal or equification or equitable in the separate shee experience in the separate shee experience in the separate sheet experience | erty  items. List an asset only once. If an ossible. If two married people are fit to this form. On the top of any add Land, or Other Real Estate You Ow interest in any residence, building, litable interest in any vehicles, e, also report it on Schedule G: E   | n asset fits in more than or<br>ling together, both are equ<br>litional pages, write your n<br>n or Have an Interest In<br>land, or similar property?  | ially responsible for supplying ame and case number (if known and case | amended filing  12/15  the category where you thinling correct information. If own). Answer every question  |
| 106A/B  VB: Proportion  tely list and describe ete and accurate as pittach a separate shee Residence, Building, any legal or equitable in property?  Vehicles  r have legal or equification or equitable in the separate shee experience in the separate shee experience in the separate sheet experience | erty  items. List an asset only once. If an ossible. If two married people are fit to this form. On the top of any add Land, or Other Real Estate You Ow interest in any residence, building, litable interest in any vehicles, e, also report it on Schedule G: E   | n asset fits in more than or<br>ling together, both are equ<br>litional pages, write your n<br>n or Have an Interest In<br>land, or similar property?  | ially responsible for supplying ame and case number (if known and case | amended filing  12/15  the category where you thinling correct information. If own). Answer every question  |
| 106A/B  VB: Proportely list and describe ete and accurate as pittach a separate shee Residence, Building, any legal or equitable in property?  Vehicles  r have legal or equification of you lease a vehicle.  | erty  items. List an asset only once. If an ossible. If two married people are fit to this form. On the top of any add Land, or Other Real Estate You Ow interest in any residence, building, I itable interest in any vehicles, e, also report it on Schedule G: E  | ling together, both are equ litional pages, write your n on or Have an Interest In land, or similar property?  whether they are regis  | ially responsible for supplying ame and case number (if known and case | amended filing  12/15  the category where you thinling correct information. If own). Answer every question  |
| tely list and describe ete and accurate as protected as eparate shee Residence, Building, any legal or equitable in property?  Vehicles  r have legal or equitable if you lease a vehicle.   | items. List an asset only once. If an ossible. If two married people are fit to this form. On the top of any add Land, or Other Real Estate You Ow interest in any residence, building, I litable interest in any vehicles, e, also report it on Schedule G: E   | ling together, both are equ litional pages, write your n on or Have an Interest In land, or similar property?  whether they are regis  | ially responsible for supplying ame and case number (if known and case | 12/15 the category where you thinl ng correct information. If own). Answer every question   |
| tely list and describe ete and accurate as protected as eparate shee Residence, Building, any legal or equitable in property?  Vehicles  r have legal or equitable if you lease a vehicle.   | items. List an asset only once. If an ossible. If two married people are fit to this form. On the top of any add Land, or Other Real Estate You Ow interest in any residence, building, I litable interest in any vehicles, e, also report it on Schedule G: E   | ling together, both are equ litional pages, write your n on or Have an Interest In land, or similar property?  whether they are regis  | ially responsible for supplying ame and case number (if known and case | the category where you thinl<br>ng correct information. If<br>own). Answer every question   |
| tely list and describe ete and accurate as protected as eparate shee Residence, Building, any legal or equitable in property?  Vehicles  r have legal or equitable if you lease a vehicle.   | items. List an asset only once. If an ossible. If two married people are fit to this form. On the top of any add Land, or Other Real Estate You Ow interest in any residence, building, I litable interest in any vehicles, e, also report it on Schedule G: E   | ling together, both are equ litional pages, write your n on or Have an Interest In land, or similar property?  whether they are regis  | ially responsible for supplying ame and case number (if known and case | the category where you thinl<br>ng correct information. If<br>own). Answer every question   |
| tely list and describe ete and accurate as putach a separate shee Residence, Building, any legal or equitable in property?  Vehicles  r have legal or equicate in the property or the property | items. List an asset only once. If an ossible. If two married people are fit to this form. On the top of any add Land, or Other Real Estate You Ow interest in any residence, building, I litable interest in any vehicles, e, also report it on Schedule G: E   | ling together, both are equ litional pages, write your n on or Have an Interest In land, or similar property?  whether they are regis  | ially responsible for supplying ame and case number (if known and case | the category where you thinl<br>ng correct information. If<br>own). Answer every question   |
| ete and accurate as pottach a separate shee  Residence, Building, any legal or equitable in  property?  Vehicles  r have legal or equitable in the property in | ossible. If two married people are fit to this form. On the top of any add Land, or Other Real Estate You Ow interest in any residence, building, litable interest in any vehicles, e, also report it on Schedule G: E   | ling together, both are equ litional pages, write your n on or Have an Interest In land, or similar property?  whether they are regis  | ially responsible for supplying ame and case number (if known and case | ng correct information. If own). Answer every question  |
| oroperty?  Vehicles  r have legal or equification of the property of the prope | interest in any residence, building, litable interest in any vehicles, e, also report it on Schedule G: E  | land, or similar property?   |  | vehicles you own that   |
| vehicles r have legal or equence of you lease a vehicle  | itable interest in any vehicles,<br>e, also report it on Schedule G: E   | whether they are regis   |  | vehicles you own that   |
| Vehicles  r have legal or equ f you lease a vehicle  | e, also report it on Schedule G: E   |  |  | vehicles you own that   |
| Vehicles  r have legal or equ f you lease a vehicle  | e, also report it on Schedule G: E   |  |  | vehicles you own that   |
| Vehicles  r have legal or equ f you lease a vehicle  | e, also report it on Schedule G: E   |  |  | vehicles you own that   |
| r have legal or equ<br>If you lease a vehicle  | e, also report it on Schedule G: E   |  |  | vehicles you own that   |
| f you lease a vehicle  | e, also report it on Schedule G: E   |  |  | vehicles you own that   |
|  |  |  |  |   |
|  | Who has an interest in th  | a muananti 2 Okaska sa   | Do not deduct secured  | claims or exemptions. Put   |
|  |  | e property? Check one  | the amount of any secu   | red claims on Schedule D:   |
|  |  |  |  |   |
| eage:  |  | only   | entire property?   | Current value of the portion you own?   |
| 1:   | At least one of the debt   | ors and another  |  |   |
| let Malibu<br>organ<br>surance   | Check if this is comm (see instructions)   | unity property   | \$16,375.00  | \$16,375.00   |
| ailers, motors, personue of the portion y ttached for Part 2.  | onal watercraft, fishing vessels, s  rou own for all of your entries f Write that number here  | nowmobiles, motorcycle   | any entries for  | \$16,375.00  Current value of the portion you own? Do not deduct secured  |
|  | et Malibu organ surance  t, motor homes, A' ailers, motors, perso  | Debtor 1 only Debtor 2 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtor Detect Malibu Degan Surance Check if this is common (see instructions)  Check if this is common (see instructions) | Debtor 2 only  Debtor 1 and Debtor 2 only  At least one of the debtors and another  Check if this is community property (see instructions)  The type of the portion you own for all of your entries from Part 2, including a trached for Part 2. Write that number here  | Debtor 1 only Debtor 2 only  Debtor 2 only  At least one of the debtors and another  et Malibu organ Surrance  Check if this is community property (see instructions)  t, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories ailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories  ue of the portion you own for all of your entries from Part 2, including any entries for ttached for Part 2. Write that number here |

Case 16-02784 Doc 1 Filed 01/29/16 Entered 01/29/16 15:02:24 Desc Main Document Page 11 of 58

| De  | btor 1                      | Demetria C.                      | Dudley   | Case number                                    | (if known)  |
|-----|-----------------------------|----------------------------------|--|--|---|
|     | Example                     | old goods and fo                 | furnishings<br>nces, furniture, linens, china, kitchenwar                                      | e  |   |
|     | □ No                        | D                                |  |  |   |
|     | ■ Yes.                      | Describe                         |  |  |   |
|     |                             |                                  | General: Couch, love seat, 2 be kitchen table, 2 tvs, small misc. Location: 4123 Lindenwood Dr |  | \$300.00  |
|     | Electron<br>Example<br>■ No | es: Televisions ar               | nd radios; audio, video, stereo, and digi<br>phones, cameras, media players, gam               | tal equipment; computers, printers, scanne     | rs; music collections; electronic devices   |
|     | ☐ Yes.                      | Describe                         |  |  |   |
|     |                             |                                  | figurines; paintings, prints, or other arty  | vork; books, pictures, or other art objects; s | tamp, coin, or baseball card collections;   |
|     | _                           | Describe                         |  |  |   |
|     | Equipme                     | ent for sports ar                |  | ipment; bicycles, pool tables, golf clubs, ski | s; canoes and kayaks; carpentry tools;  |
|     | ■ No                        | musical instru                   | uments   |  |   |
|     | ☐ Yes.                      | Describe                         |  |  |   |
|     | Firearm Examp  ■ No         |                                  | s, shotguns, ammunition, and related ed  | quipment                                       |   |
|     |                             | Describe                         |  |  |   |
|     | Clothes<br>Examp            |                                  | othes, furs, leather coats, designer wea   | r, shoes, accessories                          |   |
|     |                             | Describe                         |  |  |   |
|     |                             |                                  |  |  |   |
| 12. | Jewelry<br>Examp<br>■ No    |                                  | welry, costume jewelry, engagement rin   | gs, wedding rings, heirloom jewelry, watche    | es, gems, gold, silver  |
|     | ☐ Yes.                      | Describe                         |  |  |   |
|     |                             | rm animals<br>les: Dogs, cats, b | birds, horses  |  |   |
|     | ☐ Yes.                      | Describe                         |  |  |   |
|     | Any oth ■ No                | ner personal and                 | d household items you did not alread   | ly list, including any health aids you did     | not list  |
|     |                             | Give specific info               | formation  |  |   |
| 15  |                             |                                  | of all of your entries from Part 3, incl<br>number here  | uding any entries for pages you have att       | ached \$300.00  |
| Pa  | rt 4: Des                   | scribe Your Financ               | cial Assets  |  |   |
| Do  | you ow                      | n or have any le                 | egal or equitable interest in any of th  | e following?                                   | Current value of the portion you own? Do not deduct secured claims or exemptions. |

Document Page 12 of 58

Debtor 1 **Demetria C. Dudley** Case number (if known) 16. Cash Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition ☐ Yes..... 17. Deposits of money Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each. ☐ No Institution name: ■ Yes..... **Checking Account** Chase Bank, Tinley Park, IL \$125.00 17.1. 18. Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with brokerage firms, money market accounts Institution or issuer name: ☐ Yes..... 19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture ■ No ☐ Yes. Give specific information about them..... Name of entity: % of ownership: 20. Government and corporate bonds and other negotiable and non-negotiable instruments Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders. Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them. ☐ Yes. Give specific information about them Issuer name: 21. Retirement or pension accounts Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans ☐ No Yes. List each account separately. Type of account: Institution name: **Thrift Savings Plan** \$41.97 22. Security deposits and prepayments Your share of all unused deposits you have made so that you may continue service or use from a company Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others Institution name or individual: ☐ Yes. ..... 23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years) ■ No Issuer name and description. ☐ Yes..... 24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program. 26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1). ■ No Institution name and description. Separately file the records of any interests.11 U.S.C. § 521(c): ☐ Yes..... 25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit ■ No ☐ Yes. Give specific information about them... 26. Patents, copyrights, trademarks, trade secrets, and other intellectual property Examples: Internet domain names, websites, proceeds from royalties and licensing agreements No

Case 16-02784 Doc 1 Filed 01/29/16 Entered 01/29/16 15:02:24 Desc Main Document Page 13 of 58

| De  | ebtor 1         | Demetria C. Dudley   | Case number (if known)                    |   |
|-----|-----------------|--|---|---|
|     | □ Yes.          | Give specific information about them   | _   |   |
| 27. |                 | es, franchises, and other general intangibles<br>les: Building permits, exclusive licenses, cooperative association holdings, I                              | iquor licenses, professional licenses     |   |
|     | ■ No<br>□ Yes.  | Give specific information about them   |   |   |
| M   | oney or p       | property owed to you?  |   | Current value of the  |
|     |                 |  |   | portion you own?  Do not deduct secured claims or exemptions. |
| 28. | Tax ref         | unds owed to you   |   |   |
|     | ☐ Yes. (        | Give specific information about them, including whether you already filed the  | e returns and the tax years               |   |
| 29. | Family<br>Examp | support les: Past due or lump sum alimony, spousal support, child support, mainten   | ance, divorce settlement, property se     | ttlement  |
|     | ☐ Yes. (        | Give specific information  |   |   |
| 30. |                 | mounts someone owes you  les: Unpaid wages, disability insurance payments, disability benefits, sick pa benefits; unpaid loans you made to someone else      | ay, vacation pay, workers' compensa       | tion, Social Security   |
|     | ■ No<br>□ Yes.  | Give specific information  |   |   |
| 31. |                 | s in insurance policies<br>les: Health, disability, or life insurance; health savings account (HSA); credit  | t, homeowner's, or renter's insurance     |   |
|     | ■ No            |  |   |   |
|     | ☐ Yes. I        | Name the insurance company of each policy and list its value.  Company name:   | Beneficiary:                              | Surrender or refund value:                                    |
| 32. | If you a        | erest in property that is due you from someone who has died<br>are the beneficiary of a living trust, expect proceeds from a life insurance police has died. | icy, or are currently entitled to receive | property because  |
|     | ■ No<br>□ Yes.  | Give specific information  |   |   |
| 33. |                 | against third parties, whether or not you have filed a lawsuit or made a les: Accidents, employment disputes, insurance claims, or rights to sue             | a demand for payment                      |   |
|     | _               | Describe each claim  |   |   |
| 34. | Other o         | ontingent and unliquidated claims of every nature, including counterc  | laims of the debtor and rights to se      | et off claims   |
|     | ☐ Yes.          | Describe each claim  |   |   |
| 35. | Any fina        | ancial assets you did not already list   |   |   |
|     | ☐ Yes.          | Give specific information  |   |   |
| 36  |                 | ne dollar value of all of your entries from Part 4, including any entries fort 4. Write that number here   |   | \$166.97  |
| Pa  | rt 5: Des       | cribe Any Business-Related Property You Own or Have an Interest In. List any rea   | l estate in Part 1.                       |   |
|     | - "             | , , , , , , , , , , , , , , , , , , ,  |   |   |

No. Go to Part 6.

37. Do you own or have any legal or equitable interest in any business-related property?

Document Page 14 of 58

1/29/16 11:33AM

| Deb          | tor 1 Demetria C. Dudley   |                         | Case number (if known)       |             |
|--------------|--|-------------------------|------------------------------|-------------|
|              | Yes. Go to line 38.  |                         |                              |             |
| Part         | 6: Describe Any Farm- and Commercial Fishing-Related Property You  | Own or Have an Interest | ın.                          |             |
|              | If you own or have an interest in farmland, list it in Part 1.     |                         |                              |             |
| 46. <b>[</b> | Do you own or have any legal or equitable interest in any farm     | - or commercial fishi   | ng-related property?         |             |
|              | No. Go to Part 7.  |                         |                              |             |
|              | ☐ Yes. Go to line 47.  |                         |                              |             |
| Part         | 7: Describe All Property You Own or Have an Interest in That You   | Did Not List Above      |                              |             |
|              | Do you have other property of any kind you did not already list    | ?                       |                              |             |
|              | Examples: Season tickets, country club membership  No              |                         |                              |             |
|              | Yes. Give specific information                                     |                         |                              |             |
|              | 1 100. Olive specific information                                  |                         |                              |             |
| 54.          | Add the dollar value of all of your entries from Part 7. Write the | hat number here         |                              | \$0.00      |
| Part         | 8: List the Totals of Each Part of this Form                       |                         |                              |             |
| 55.          | Part 1: Total real estate, line 2                                  |                         |                              | \$0.00      |
| 56.          | Part 2: Total vehicles, line 5                                     | \$16,375.00             |                              | <u> </u>    |
| 57.          | Part 3: Total personal and household items, line 15                | \$300.00                |                              |             |
| 58.          | Part 4: Total financial assets, line 36                            | \$166.97                |                              |             |
| 59.          | Part 5: Total business-related property, line 45                   | \$0.00                  |                              |             |
| 60.          | Part 6: Total farm- and fishing-related property, line 52          | \$0.00                  |                              |             |
| 61.          | Part 7: Total other property not listed, line 54 +                 | \$0.00                  |                              |             |
| 62.          | Total personal property. Add lines 56 through 61                   | \$16,841.97             | Copy personal property total | \$16,841.97 |
| 63.          | Total of all property on Schedule A/B. Add line 55 + line 62       |                         |                              | \$16,841.97 |

Best Case Bankruptcy

|             |                              | Document    | Page 15 of 58 | 1/29/16 11:33A |
|-------------|------------------------------|-------------|---------------|----------------|
| nis informa | ation to identify your case: |             |               |                |
| 1           | Demetria C. Dudley           |             |               |                |
|             | First Name                   | Middle Name | Last Name     |                |

Debtor 2 (Spouse if, filing) Middle Name United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS Case number (if known) ☐ Check if this is an

amended filing

#### Official Form 106C

Fill in t Debtor

## Schedule C: The Property You Claim as Exempt

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on Schedule A/B: Property (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of Part 2: Additional Page as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds-may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

| Part 1: | Identify the Property You Claim as Exempt |  |
|---------|---|--|
|         |   |  |

| <ol> <li>Which set @</li> </ol> | of exemptions are | vou claiming | ? Check one onlv. | . even it vour s | spouse is filing with y | ou. |
|---------------------------------|-------------------|--------------|-------------------|------------------|-------------------------|-----|
|---------------------------------|-------------------|--------------|-------------------|------------------|-------------------------|-----|

■ You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)

☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)

2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

| Brief description of the property and line on<br>Schedule A/B that lists this property  | Current value of the portion you own | Amount of the exemption you claim |   | Specific laws that allow exemption |
|---|--------------------------------------|-----------------------------------|---|------------------------------------|
|   | Copy the value from<br>Schedule A/B  | Che                               |   |                                    |
| 2014 Chevrolet Malibu<br>Lien w/JP Morgan   | \$16,375.00                          |                                   | \$2,400.00  | 735 ILCS 5/12-1001(c)              |
| Ins: Talro Insurance Line from Schedule A/B: 3.1  |                                      |                                   | 100% of fair market value, up to any applicable statutory limit |                                    |
| General: Couch, love seat, 2<br>bedroom sets (1king, 1 bunk beds),  | \$300.00                             |                                   | \$300.00  | 735 ILCS 5/12-1001(b)              |
| kitchen table, 2 tvs, small misc.<br>appliances<br>Location: 4123 Lindenwood Dr Apt.<br>2SW, Matteson IL 60443<br>Line from <i>Schedule A/B</i> : 6.1 |                                      |                                   | 100% of fair market value, up to any applicable statutory limit |                                    |
| Checking Account<br>Chase Bank, Tinley Park, IL   | \$125.00                             |                                   | \$125.00  | 735 ILCS 5/12-1001(b)              |
| Line from Schedule A/B: 17.1  |                                      |                                   | 100% of fair market value, up to any applicable statutory limit |                                    |
| Thrift Savings Plan Line from Schedule A/B: 21.1  | \$41.97                              |                                   | \$41.97   | 735 ILCS 5/12-1001(b)              |
| Elio IIolii Gonodalo 702. Elii  |                                      |                                   | 100% of fair market value, up to any applicable statutory limit |                                    |

Case 16-02784 Doc 1 Filed 01/29/16 Entered 01/29/16 15:02:24 Desc Main Document Page 16 of 58

| De | btor 1 | Der  | metria C. Dudley Ca   | se number (if known)    |
|----|--------|------|---|-------------------------|
| 3. | (Sub   | ,    | claiming a homestead exemption of more than \$155,675? o adjustment on 4/01/16 and every 3 years after that for cases filed on or after the | ne date of adjustment.) |
|    |        | Yes. | Did you acquire the property covered by the exemption within 1,215 days before  | e you filed this case?  |
|    |        |      | No  |                         |
|    |        |      | Yes   |                         |

|                               | Case 16-02784 Do   | oc 1 Filed 01/29/16<br>Document  | Entered 0:<br>Page 17 of       | 1/29/16 15:02:24<br>58     | 4 Desc Mai           | n<br>1/29/16 11:33AM |  |  |
|-------------------------------|--|--|--------------------------------|----------------------------|----------------------|----------------------|--|--|
| Fill in th                    | nis information to identify you  | r case:  |                                |                            |                      |                      |  |  |
| Debtor 1 Debtor 2 (Spouse if, | First Name   | Middle Name  Middle Name   | Last Name  Last Name  ILLINOIS |                            |                      |                      |  |  |
| Case nu<br>(if known)         | Case number Check if this is an amended filing   |  |                                |                            |                      |                      |  |  |
|                               | <u>al Form 106D</u><br>dule D: Creditors   | Who Have Claims  | s Secured                      | by Property                |                      | 12/15                |  |  |
| needed, coknown).  1. Do any  | opy the Additional Page, fill it out, creditors have claims secured by   | nis form to the court with your ot   | o this form. On the t          | op of any additional pages | s, write your name a |                      |  |  |
|                               | _  | bolow.   |                                |                            |                      |                      |  |  |
| 2. List all<br>each clair     | Part 1: List All Secured Claims  2. List all secured claims. If a creditor has more than one secured claim, list the creditor separately for each claim. If more than one creditor has a particular claim, list the other creditors in Part 2. As much as possible, list the claims in alphabetical order according to the creditor's name.  Column A  Amount of claim Do not deduct the value of collateral that supports this claim If any |  |                                |                            |                      |                      |  |  |
| $\overline{}$                 | ditor's Name   | Describe the property that secure  | es the claim:                  | \$24,008.99                | \$16,375.00          | \$7,633.99           |  |  |
| Po<br>Co                      | D Box 901003 Dlumbus, OH 43224 Inber, Street, City, State & Zip Code   | As of the date you file, the claim in apply.  Contingent Unliquidated Disputed | is: Check all that             |                            |                      |                      |  |  |
| Who ow                        | es the debt? Check one.  | Nature of lien. Check all that app   | ly.                            |                            |                      |                      |  |  |
| Debto                         | r 1 only   | ☐ An agreement you made (such a  | as mortgage or secur           | ed                         |                      |                      |  |  |

| Po Box 901003<br>Columbus, OH                     |  | As of the date you file, the claim is: apply.  Contingent | Check all that      |               |  |
|---|--|---|---------------------|---------------|--|
| Number, Street, City, S                           | tate & Zip Code                              | ☐ Unliquidated  |                     |               |  |
| Who owes the debt? C                              | neck one.                                    | ☐ Disputed Nature of lien. Check all that apply.          |                     |               |  |
| ■ Debtor 1 only □ Debtor 2 only                   |  | ☐ An agreement you made (such as car loan)                | mortgage or secure  | ed            |  |
| Debtor 1 and Debtor 2                             | only   | ☐ Statutory lien (such as tax lien, me                    | chanic's lien)      |               |  |
| ☐ At least one of the debtors and another         |  | ☐ Judgment lien from a lawsuit                            |                     |               |  |
| ☐ Check if this claim relates to a community debt |  | Other (including a right to offset)                       | Purchase Mo         | oney Security |  |
| Date debt was incurred                            | Opened<br>11/08/14<br>Last Active<br>6/09/15 | Last 4 digits of account num                              | <sub>oer</sub> 8539 |               |  |

Add the dollar value of your entries in Column A on this page. Write that number here: \$24,008.99 If this is the last page of your form, add the dollar value totals from all pages. \$24,008.99 Write that number here:

#### Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

Name Address

**Chase Auto Finance** P.O. Box 901076 Fort Worth, TX 76101-2076 On which line in Part 1 did you enter the creditor?

Last 4 digits of account number

2.1

Case 16-02784 Doc 1 Filed 01/29/16 Entered 01/29/16 15:02:24 Desc Main Document Page 18 of 58

Debtor 1 Demetria C. Dudley
First Name Middle Name Last Name

Case number (if know)

Document Page 19 of 58

| Fill in this info  | ormation to identify your case  |   |                                     |   |   |   |
|--|---|---|-------------------------------------|---|---|---|
| Debtor 1   | Demetria C. Dudley  |   |                                     |   |   |   |
| <b>5</b> 1 6   | First Name  | Middle Name La  | ast Name                            |   |   |   |
| Debtor 2<br>(Spouse if, filing)  | First Name  | Middle Name La  | ast Name                            |   |   |   |
| United States F  | Bankruptcy Court for the: NO  | RTHERN DISTRICT OF ILLING   | วเร                                 |   |   |   |
| Office Otates E  | Jankraptoy Court for the.   | TOTAL DISTRICT OF TELLING   |                                     |   |   |   |
| Case number  |   |   |                                     |   |   |   |
| (II KIIOWII)   |   |   |                                     |   | _   | ck if this is an<br>nded filing             |
|  |   |   |                                     |   | anner   | idea illing                                 |
| Official For   | rm 106E/F   |   |                                     |   |   |   |
| Schedule   | E/F: Creditors Who  | <b>Have Unsecured Cl</b>  | aims                                |   |   | 12/15                                       |
| Schedule G: Exec<br>D: Creditors Who<br>the Continuation<br>number (if known | ontracts or unexpired leases that cutory Contracts and Unexpired Lead Have Claims Secured by Property Page to this page. If you have no in).  All of Your PRIORITY Unsecu | eases (Official Form 106G). Do not<br>y. If more space is needed, copy th<br>nformation to report in a Part, do r | include any cre<br>ne Part you need | editors with partially a<br>d, fill it out, number th | secured claims that a<br>ne entries in the boxe | re listed in Schedule s on the left. Attach |
|  | litors have priority unsecured clain  |   |                                     |   |   |   |
| ☐ No. Go to  | • •   | •   |                                     |   |   |   |
| Yes.   |   |   |                                     |   |   |   |
| possible, list<br>1. If more tha   | type of claim it is. If a claim has both<br>the claims in alphabetical order acco<br>an one creditor holds a particular clair<br>anation of each type of claim, see the   | ording to the creditor's name. If you ham, list the other creditors in Part 3.                                    | ave more than tv                    |   |   |   |
| 2.1 Illinois   | s Tollway   | Last 4 digits of account nu   | mber 8392                           | \$211.3   | _   |   |
| •  | Creditor's Name  3ox 5201   | When was the debt incurre   | ed? 11/0/2                          |   |   |   |
| _  | IL 60532-5201   | Wilen was the debt incurre  | 11/0/2                              | .006  | _   |   |
|  | r Street City State Zlp Code  | As of the date you file, the  | claim is: Check                     | all that apply  |   |   |
| _  | red the debt? Check one.  | ☐ Contingent  |                                     |   |   |   |
| ■ Debtor 1   | 1 only  | ☐ Unliquidated  |                                     |   |   |   |
| ☐ Debtor 2   | 2 only  | ☐ Disputed  |                                     |   |   |   |
| ☐ Debtor 1   | 1 and Debtor 2 only   | Type of PRIORITY unsecur  | ed claim:                           |   |   |   |
| ☐ At least   | one of the debtors and another  | ☐ Domestic support obligat  | ions                                |   |   |   |
| ☐ Check i  | if this claim is for a community de   | Taxes and certain other of  | debts you owe th                    | e government  |   |   |
| Is the clain   | n subject to offset?  | ☐ Claims for death or person  | onal injury while y                 | ou were intoxicated                                   |   |   |
| ■ No   |   | Other. Specify  |                                     |   |   | _   |
| ☐ Yes  |   |   |                                     |   |   |   |
| Part 2: List   | All of Your NONPRIORITY Un  | secured Claims  |                                     |   |   |   |
| 3. Do any cred   | litors have nonpriority unsecured o   | laims against you?  |                                     |   |   |   |
| ☐ No. You h  | have nothing to report in this part. Su   | bmit this form to the court with your o   | other schedules.                    |   |   |   |
| Yes.   |   |   |                                     |   |   |   |
| claim, list the  | our nonpriority unsecured claims in<br>ecreditor separately for each claim. F<br>s a particular claim, list the other cred  | or each claim listed, identify what typ   | pe of claim it is. [                | Do not list claims alrea                              | dy included in Part 1. If                       | f more than one                             |

Total claim

1/29/16 11:33AM

Best Case Bankruptcy

1/29/16 11:33AM Page 20 of 58 Document Debtor 1 Demetria C. Dudley Case number (if know) 4.1 \$50.00 **Advocate Medical Group** Last 4 digits of account number 4848 Nonpriority Creditor's Name 8550 W Bryn Mawr When was the debt incurred? 8th FI Chicago, IL 60631 As of the date you file, the claim is: Check all that apply Number Street City State Zlp Code Who incurred the debt? Check one. ☐ Contingent Debtor 1 only ■ Unliquidated Debtor 2 only ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim:  $\square$  At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts No ☐ Yes Other. Specify 4.2 Advocate Medical Group Last 4 digits of account number 4848 \$20.00 Nonpriority Creditor's Name 8550 W Bryn Mawr When was the debt incurred? 7/27/2015 8th FI Chicago, IL 60631 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent Debtor 1 only ■ Unliquidated Debtor 2 only ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt Obligations arising out of a separation agreement or divorce that you did not report as priority claims Is the claim subject to offset?  $\hfill\square$  Debts to pension or profit-sharing plans, and other similar debts No ■ Other. Specify Patient: Debtor ☐ Yes 4.3 **All Brothers Used Cars** Last 4 digits of account number \$0.00 Nonpriority Creditor's Name When was the debt incurred? Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent ■ Debtor 1 only ■ Unliquidated Debtor 2 only ☐ Disputed ☐ Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt Obligations arising out of a separation agreement or divorce that you did not

■ No
□ Yes

report as priority claims

Other. Specify

☐ Debts to pension or profit-sharing plans, and other similar debts

Is the claim subject to offset?

Case 16-02784 Doc 1 Filed 01/29/16 Entered 01/29/16 15:02:24 Desc Main Document Page 21 of 58

| otor 1 Demetria C. Dudley  |  | Case number (if know)                         |          |
|--|--|---|----------|
| Allied Interstate Inc  Nonpriority Creditor's Name  435 Ford Rd                  | Last 4 digits of account number  When was the debt incurred? | 3910  | \$136.00 |
| Ste 800 Minneapolis, MN 55426  Number Street City State Zlp Code                 | As of the date you file, the claim                           | is: Check all that apply                      |          |
| Who incurred the debt? Check one.  | _  |   |          |
| Debtor 1 only  | ☐ Contingent   |   |          |
| Debtor 2 only  | ☐ Unliquidated☐ Disputed                                     |   |          |
| ☐ Debtor 1 and Debtor 2 only   | Type of NONPRIORITY unsecure                                 | d claim:                                      |          |
| ☐ At least one of the debtors and another  | ☐ Student loans  |   |          |
| ☐ Check if this claim is for a community debt<br>Is the claim subject to offset? | ☐ Obligations arising out of a separeport as priority claims | aration agreement or divorce that you did not |          |
| ■ No   | Debts to pension or profit-sharing                           | ng plans, and other similar debts             |          |
| Yes  | Other. Specify   |   |          |
| American Financial Cre   | Last 4 digits of account number                              | 2122  | \$41.00  |
| Nonpriority Creditor's Name 10333 N Meridian St Ste Indianapolis, IN 46290       | When was the debt incurred?                                  | Opened 9/07/12                                |          |
| Number Street City State Zlp Code  | As of the date you file, the claim                           |   |          |
| Who incurred the debt? Check one.  | ☐ Contingent   |   |          |
| Debtor 1 only  | ☐ Unliquidated   |   |          |
| Debtor 2 only  | ☐ Disputed   |   |          |
| Debtor 1 and Debtor 2 only   | Type of NONPRIORITY unsecure                                 | d claim:                                      |          |
| $\square$ At least one of the debtors and another                                | ☐ Student loans  |   |          |
| ☐ Check if this claim is for a community debt Is the claim subject to offset?    | Obligations arising out of a separeport as priority claims   | aration agreement or divorce that you did not |          |
| ■ No   | Debts to pension or profit-sharing                           | ng plans, and other similar debts             |          |
| Yes  | Other. Specify Collection                                    | Attorney Wellgroup Healthpart                 |          |
| American Financial Cre   | Last 4 digits of account number                              | 2123  | \$217.00 |
| Nonpriority Creditor's Name<br>10333 N Meridian St Ste<br>Indianapolis, IN 46290 | When was the debt incurred?                                  | Opened 9/07/12                                |          |
| Number Street City State Zlp Code  | As of the date you file, the claim                           | is: Check all that apply                      |          |
| Who incurred the debt? Check one.  | ☐ Contingent   |   |          |
| ■ Debtor 1 only  | ☐ Unliquidated   |   |          |
| Debtor 2 only  | □ Disputed   |   |          |
| ☐ Debtor 1 and Debtor 2 only   | Type of NONPRIORITY unsecure                                 | d claim:                                      |          |
| ☐ At least one of the debtors and another  | ☐ Student loans  |   |          |
| ☐ Check if this claim is for a community debt Is the claim subject to offset?    | Obligations arising out of a separeport as priority claims   | aration agreement or divorce that you did not |          |
| ■ No   | Debts to pension or profit-sharing                           | •   |          |
| ☐ Yes  | ■ Other. Specify Collection                                  | Attorney Wellgroup Healthpart                 |          |

Case 16-02784 Doc 1 Filed 01/29/16 Entered 01/29/16 15:02:24 Desc Main Document Page 22 of 58

| Debtor | Demetria C. Dudley Case number (if know)   |   |            |  |
|--------|--|---|------------|--|
| 4.7    | American Financial Cre   | Last 4 digits of account number 1588  | \$185.00   |  |
|        | Nonpriority Creditor's Name<br>10333 N Meridian St Ste<br>Indianapolis, IN 46290 | When was the debt incurred? Opened 8/13/12  |            |  |
|        | Number Street City State Zlp Code  | As of the date you file, the claim is: Check all that apply   |            |  |
|        | Who incurred the debt? Check one.  | ☐ Contingent  |            |  |
|        | Debtor 1 only  | ☐ Unliquidated  |            |  |
|        | Debtor 2 only  | ☐ Disputed  |            |  |
|        | Debtor 1 and Debtor 2 only   | Type of NONPRIORITY unsecured claim:  |            |  |
|        | At least one of the debtors and another  | ☐ Student loans   |            |  |
|        | ☐ Check if this claim is for a community debt Is the claim subject to offset?    | $\square$ Obligations arising out of a separation agreement or divorce that you did not report as priority claims |            |  |
|        | No   | $\square$ Debts to pension or profit-sharing plans, and other similar debts                                       |            |  |
|        | Yes  | Other. Specify Collection Attorney Wellgroup Healthpart   |            |  |
| 4.8    | American Financial Cre   | Last 4 digits of account number 1587  | \$179.00   |  |
|        | Nonpriority Creditor's Name 10333 N Meridian St Ste                              | When was the debt incurred? Opened 8/13/12  |            |  |
|        | Indianapolis, IN 46290  Number Street City State Zlp Code                        | As of the date you file, the claim is: Check all that apply   |            |  |
|        | Who incurred the debt? Check one.  |   |            |  |
|        | Debtor 1 only  | ☐ Contingent  |            |  |
|        | ☐ Debtor 2 only  | ☐ Unliquidated  |            |  |
|        | ☐ Debtor 1 and Debtor 2 only   | ☐ Disputed  Type of NONPRIORITY unsecured claim:  |            |  |
|        | ☐ At least one of the debtors and another  | Student loans   |            |  |
|        | ☐ Check if this claim is for a community debt                                    | ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims         |            |  |
|        | ■ No   | ☐ Debts to pension or profit-sharing plans, and other similar debts   |            |  |
|        | Yes  | ■ Other. Specify Collection Attorney Wellgroup Healthpart   |            |  |
| 4.9    | Asset Acceptance LLC   | Last 4 digits of account number 3399  | \$1,176.00 |  |
|        | Nonpriority Creditor's Name P.O. Box 1630  | When was the debt incurred?   | ·          |  |
|        | Warren, MI 48090-2039  Number Street City State Zlp Code                         | As of the date you file, the claim is: Check all that apply   |            |  |
|        | Who incurred the debt? Check one.  | ☐ Contingent  |            |  |
|        | Debtor 1 only  | ☐ Unliquidated  |            |  |
|        | Debtor 2 only  | ☐ Disputed  |            |  |
|        | Debtor 1 and Debtor 2 only   | Type of NONPRIORITY unsecured claim:  |            |  |
|        | At least one of the debtors and another  | ☐ Student loans   |            |  |
|        | ☐ Check if this claim is for a community debt Is the claim subject to offset?    | $\square$ Obligations arising out of a separation agreement or divorce that you did not report as priority claims |            |  |
|        | ■ No   | $\square$ Debts to pension or profit-sharing plans, and other similar debts                                       |            |  |
|        | Yes  | ■ Other. Specify Bally Total Fitness  |            |  |

Case 16-02784 Doc 1 Filed 01/29/16 Entered 01/29/16 15:02:24 Desc Main Document Page 23 of 58

| City of Chicago   | Last 4 digits of account number                                  | 0160   | \$2,479.00 |
|---|--|--|------------|
| Nonpriority Creditor's Name<br>121 N LaSalle - Room 107A<br>Chicago, IL 60602   | When was the debt incurred?                                      | 5/16/2014                                    | . ,        |
| Number Street City State Zlp Code  Who incurred the debt? Check one.  | As of the date you file, the claim i                             |  |            |
| Debtor 1 only   | Contingent   |  |            |
| Debtor 2 only   | ☐ Unliquidated   |  |            |
| ☐ Debtor 1 and Debtor 2 only  | ☐ Disputed  Type of NONPRIORITY unsecured                        | loloim                                       |            |
| ☐ At least one of the debtors and another   | Student loans  | i Ciaiii.                                    |            |
| ☐ Check if this claim is for a community debt   | _  | ration agreement or divorce that you did not |            |
| ■ No  | ☐ Debts to pension or profit-sharin                              | g plans, and other similar debts             |            |
| ☐ Yes   | Other. Specify Parking tic                                       | kets   |            |
| CMI   | Last 4 digits of account number                                  |  | \$531.00   |
| Nonpriority Creditor's Name 4200 International Pkwy Carrollton, TX 75007  | When was the debt incurred?                                      | 3/23/3009                                    |            |
| Number Street City State Zlp Code   | As of the date you file, the claim is                            | s: Check all that apply                      |            |
| Who incurred the debt? Check one.   | ☐ Contingent   |  |            |
| ■ Debtor 1 only   | ☐ Unliquidated   |  |            |
| Debtor 2 only   | ☐ Disputed   |  |            |
| Debtor 1 and Debtor 2 only  | Type of NONPRIORITY unsecured                                    | l claim:                                     |            |
| At least one of the debtors and another   | ☐ Student loans  |  |            |
| Check if this claim is for a community debt   | ☐ Obligations arising out of a sepa<br>report as priority claims | ration agreement or divorce that you did not |            |
| ■ No  | Debts to pension or profit-sharin                                | g plans, and other similar debts             |            |
| Yes   | Other. Specify Comcast   |  |            |
| Comcast   | Last 4 digits of account number                                  | 3853   | \$575.06   |
| Nonpriority Creditor's Name P.O. Box 3002   | When was the debt incurred?                                      | 9/2007                                       |            |
| Southeastern, PA 19398-3002  Number Street City State Zip Code  | As of the date you file, the claim is                            | s: Check all that apply                      |            |
| Who incurred the debt? Check one.   | ☐ Contingent   |  |            |
| Debtor 1 only   | ☐ Unliquidated   |  |            |
| ☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only  | ☐ Disputed  Type of NONPRIORITY unsecured                        | l claim:                                     |            |
| _   | ☐ Student loans  |  |            |
| ☐ At least one of the debtors and another   | - · · · · · · · · · · · ·  |  |            |
| ☐ At least one of the debtors and another ☐ Check if this claim is for a community debt Is the claim subject to offset? | ☐ Obligations arising out of a sepa report as priority claims    | ration agreement or divorce that you did not |            |
| ☐ Check if this claim is for a community debt   |  | ,  |            |

Case 16-02784 Doc 1 Filed 01/29/16 Entered 01/29/16 15:02:24 Desc Main Document Page 24 of 58

| Debtor | ebtor 1 Demetria C. Dudley Case number (if know)                              |  |  |             |  |  |  |
|--------|---|--|--|-------------|--|--|--|
| 4.13   | Consultants in Pathology  | Last 4 digits of account number  | 5113   | \$95.66     |  |  |  |
|        | Nonpriority Creditor's Name P.O. Box 30309 Charleston, SC 29417               | When was the debt incurred?  | 7/11/2012                                    |             |  |  |  |
| -      | Number Street City State Zlp Code   | As of the date you file, the claim i   |  |             |  |  |  |
|        | Who incurred the debt? Check one.   | ☐ Contingent   |  |             |  |  |  |
|        | Debtor 1 only   | ☐ Unliquidated   |  |             |  |  |  |
|        | Debtor 2 only   | ☐ Disputed   |  |             |  |  |  |
|        | Debtor 1 and Debtor 2 only  | Type of NONPRIORITY unsecured  | l claim:                                     |             |  |  |  |
|        | At least one of the debtors and another                                       | ☐ Student loans  |  |             |  |  |  |
|        | ☐ Check if this claim is for a community debt Is the claim subject to offset? | ☐ Obligations arising out of a separeport as priority claims   | ration agreement or divorce that you did not |             |  |  |  |
|        | ■ No  | Debts to pension or profit-sharing   | g plans, and other similar debts             |             |  |  |  |
|        | Yes   | ■ Other. Specify Physician:  | Fulton Porter III, MD                        |             |  |  |  |
| 4.14   | Crescent Bank And Trus  | Last 4 digits of account number  | 0001   | \$0.00      |  |  |  |
|        | Nonpriority Creditor's Name  5401 Jefferson Hwy Ste D  Harahan, LA 70123      | When was the debt incurred?  | Opened 9/15/10 Last Active 12/03/12          |             |  |  |  |
| -      | Number Street City State Zlp Code   | As of the date you file, the claim i   | s: Check all that apply                      |             |  |  |  |
|        | Who incurred the debt? Check one.   | ☐ Contingent   |  |             |  |  |  |
|        | Debtor 1 only   | ☐ Unliquidated ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims |  |             |  |  |  |
|        | Debtor 2 only   |  |  |             |  |  |  |
|        | Debtor 1 and Debtor 2 only  |  |  |             |  |  |  |
|        | At least one of the debtors and another                                       |  |  |             |  |  |  |
|        | ☐ Check if this claim is for a community debt Is the claim subject to offset? |  |  |             |  |  |  |
|        | ■ No  | Debts to pension or profit-sharing   | g plans, and other similar debts             |             |  |  |  |
|        | Yes   | Other. Specify Automobile  | 9  |             |  |  |  |
| 4.15   | Dept Of Education/NeIn  | Last 4 digits of account number  | 6674   | \$29,548.53 |  |  |  |
|        | Nonpriority Creditor's Name  121 S 13th St Lincoln, NE 68508                  | When was the debt incurred?  | Opened 8/27/11 Last Active 6/01/15           |             |  |  |  |
| -      | Number Street City State Zlp Code   | As of the date you file, the claim i   | s: Check all that apply                      |             |  |  |  |
|        | Who incurred the debt? Check one.   | ☐ Contingent   |  |             |  |  |  |
|        | ■ Debtor 1 only   | ☐ Unliquidated ☐ Disputed  |  |             |  |  |  |
|        | ☐ Debtor 2 only   |  |  |             |  |  |  |
|        | ☐ Debtor 1 and Debtor 2 only  | Type of NONPRIORITY unsecured  | d claim:                                     |             |  |  |  |
|        | $\square$ At least one of the debtors and another                             | ☐ Student loans  |  |             |  |  |  |
|        | ☐ Check if this claim is for a community debt Is the claim subject to offset? | Obligations arising out of a separeport as priority claims   | ration agreement or divorce that you did not |             |  |  |  |
|        | ■ No  | ☐ Debts to pension or profit-sharin  | g plans, and other similar debts             |             |  |  |  |
|        | ☐ Yes   | Other. Specify Employme  | nt   |             |  |  |  |

Case 16-02784 Doc 1 Filed 01/29/16 Entered 01/29/16 15:02:24 Desc Main Document Page 25 of 58 | 1/29/16 11:33AM |

Debtor 1 Demetria C. Dudley | Case number (if know) |

4.16 Enhanced Recovery Co I | Last 4 digits of account number | 1028 | \$184.3

| Enhanced Recovery Co L  Nonpriority Creditor's Name                           | Last 4 digits of account number                              |   | \$184.37 |
|---|--|---|----------|
| 8014 Bayberry Rd<br>Jacksonville, FL 32256                                    | When was the debt incurred?                                  | Opened 7/22/14 Last Active 10/01/13           |          |
| Number Street City State Zlp Code   | As of the date you file, the claim i                         | is: Check all that apply                      |          |
| Who incurred the debt? Check one.   | ☐ Contingent   |   |          |
| ■ Debtor 1 only   | ☐ Unliquidated   |   |          |
| Debtor 2 only   | ☐ Disputed   |   |          |
| Debtor 1 and Debtor 2 only  | Type of NONPRIORITY unsecured                                | d claim:                                      |          |
| ☐ At least one of the debtors and another                                     | ☐ Student loans  |   |          |
| ☐ Check if this claim is for a community debt Is the claim subject to offset? | ☐ Obligations arising out of a separeport as priority claims | aration agreement or divorce that you did not |          |
| ■ No  | Debts to pension or profit-sharing                           | ng plans, and other similar debts             |          |
| Yes   | Other. Specify Collection                                    | Attorney Tmobile                              |          |
| Escallate LLC   | Last 4 digits of account number                              | 1242  | \$832.50 |
| Nonpriority Creditor's Name P.O. Box 630906 Cincinnati, OH 45253-0906         | When was the debt incurred?                                  | 3/24/2015                                     |          |
| Number Street City State Zlp Code   | As of the date you file, the claim i                         | is: Check all that apply                      |          |
| Who incurred the debt? Check one.   | ☐ Contingent   |   |          |
| Debtor 1 only   | ☐ Unliquidated   |   |          |
| Debtor 2 only   | ☐ Disputed   |   |          |
| ☐ Debtor 1 and Debtor 2 only  | Type of NONPRIORITY unsecured                                | d claim:                                      |          |
| $\square$ At least one of the debtors and another                             | ☐ Student loans  |   |          |
| ☐ Check if this claim is for a community debt Is the claim subject to offset? | Obligations arising out of a separeport as priority claims   | aration agreement or divorce that you did not |          |
| No  | Debts to pension or profit-sharing                           | ng plans, and other similar debts             |          |
| Yes   | Other. Specify St James H                                    | -lospital                                     |          |
| First Invst Svc/First   | Last 4 digits of account number                              | 0001  | \$0.00   |
| Nonpriority Creditor's Name   |  | One and 44/04/42 Least Active                 |          |
| 5757 Woodway Dr Ste 400<br>Houston, TX 77057                                  | When was the debt incurred?                                  | Opened 11/21/12 Last Active 11/19/14          |          |
| Number Street City State Zlp Code   | As of the date you file, the claim i                         | is: Check all that apply                      |          |
| Who incurred the debt? Check one.   | ☐ Contingent   |   |          |
| ■ Debtor 1 only   | ☐ Unliquidated   |   |          |
| Debtor 2 only   | ☐ Disputed   |   |          |
| ☐ Debtor 1 and Debtor 2 only  | Type of NONPRIORITY unsecured                                | d claim:                                      |          |
| ☐ At least one of the debtors and another                                     | ☐ Student loans  |   |          |
| ☐ Check if this claim is for a community debt Is the claim subject to offset? | ☐ Obligations arising out of a separeport as priority claims | aration agreement or divorce that you did not |          |
| ■ No  | Debts to pension or profit-sharing                           | ng plans, and other similar debts             |          |
| Yes   | Other. Specify Automobile                                    | e   |          |

Case 16-02784 Doc 1 Filed 01/29/16 Entered 01/29/16 15:02:24 Desc Main Document Page 26 of 58 1/29/16 11:33AM

| Debtor | 1 Demetria C. Dudley  | Case number (if know)                                      |   |          |  |
|--------|---|--|---|----------|--|
| 4.19   | Fst Premie  | Last 4 digits of account number                            | 8148  | \$423.00 |  |
|        | Nonpriority Creditor's Name   | When was the debt incurred?                                | Opened 7/01/09 Last Active 11/01/09           |          |  |
|        | Number Street City State Zlp Code Who incurred the debt? Check one.                     | As of the date you file, the claim                         | is: Check all that apply                      |          |  |
|        | ■ Debtor 1 only  □ Debtor 2 only  | ☐ Unliquidated ☐ Disputed                                  |   |          |  |
|        | ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another                  | Type of NONPRIORITY unsecured  Student loans               | d claim:                                      |          |  |
|        | ☐ Check if this claim is for a community debt Is the claim subject to offset?           |  | aration agreement or divorce that you did not |          |  |
|        | ■ No  | ☐ Debts to pension or profit-sharing                       |   |          |  |
|        | Yes   | Other. Specify Attorney F                                  | ees   |          |  |
| 4.20   | GLA Collections Nonpriority Creditor's Name   | Last 4 digits of account number                            |   | \$150.00 |  |
|        | P.O. Box 991199<br>Louisville, KY 40269   | When was the debt incurred?                                |   |          |  |
|        | Number Street City State Zlp Code  Who incurred the debt? Check one.                    | As of the date you file, the claim                         | is: Check all that apply                      |          |  |
|        | Debtor 1 only   | ☐ Contingent ☐ Unliquidated                                |   |          |  |
|        | Debtor 2 only   | Disputed   |   |          |  |
|        | ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another                  | Type of NONPRIORITY unsecured  ☐ Student loans             | d claim:                                      |          |  |
|        | ☐ Check if this claim is for a community debt Is the claim subject to offset?           | _  | aration agreement or divorce that you did not |          |  |
|        | ■ No  | ☐ Debts to pension or profit-sharing                       | ng plans, and other similar debts             |          |  |
|        | Yes   | Other. Specify Medical-IU                                  | Medical Group                                 |          |  |
| 4.21   | Harris & Harris Nonpriority Creditor's Name   | Last 4 digits of account number                            |   | \$300.00 |  |
|        | 111 West Jackson<br>Suite 400   | When was the debt incurred?                                |   |          |  |
|        | Chicago, IL 60604  Number Street City State Zlp Code  Who incurred the debt? Check one. | As of the date you file, the claim                         | is: Check all that apply                      |          |  |
|        | Debtor 1 only   | ☐ Contingent   |   |          |  |
|        | ☐ Debtor 2 only   | ☐ Unliquidated   |   |          |  |
|        | ☐ Debtor 1 and Debtor 2 only  | ☐ Disputed  Type of NONPRIORITY unsecure                   | d claim:                                      |          |  |
|        | ☐ At least one of the debtors and another   | Student loans  |   |          |  |
|        | ☐ Check if this claim is for a community debt Is the claim subject to offset?           | Obligations arising out of a separeport as priority claims | aration agreement or divorce that you did not |          |  |
|        | ■ No  | Debts to pension or profit-sharing                         | g plans, and other similar debts              |          |  |
|        | Yes   | Other. Specify   |   |          |  |

Case 16-02784 Doc 1 Filed 01/29/16 Entered 01/29/16 15:02:24 Desc Main Document Page 27 of 58

| Debtor | 1 Demetria C. Dudley  | Case number (if know)  |  |          |  |  |
|--------|---|--|--|----------|--|--|
| 4.22   | I C System Inc Nonpriority Creditor's Name Po Box 64378 Saint Paul, MN 55164  | Last 4 digits of account number When was the debt incurred?  | 8001<br>Opened 9/08/14   | \$131.00 |  |  |
|        | Number Street City State Zlp Code Who incurred the debt? Check one.   | As of the date you file, the claim   |  |          |  |  |
|        | ■ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only  | ☐ Unliquidated ☐ Disputed  Type of NONPRIORITY unsecured   | d claim:   |          |  |  |
|        | ☐ At least one of the debtors and another ☐ Check if this claim is for a community debt Is the claim subject to offset?   | report as priority claims  | aration agreement or divorce that you did not  |          |  |  |
|        | ■ No □ Yes  | ☐ Debts to pension or profit-sharin ☐ Other. Specify Collection  | Attorney Illinois Insurance C  |          |  |  |
| 4.23   | Mcsi Inc Nonpriority Creditor's Name  | Last 4 digits of account number  | 4264   | \$200.00 |  |  |
|        | Po Box 327 Palos Heights, IL 60463  Number Street City State Zlp Code Who incurred the debt? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset?  No Yes | When was the debt incurred?  As of the date you file, the claim is Contingent Unliquidated Disputed Type of NONPRIORITY unsecured Student loans Obligations arising out of a separeport as priority claims Debts to pension or profit-sharin Other. Specify Collection | d claim:<br>aration agreement or divorce that you did not<br>ng plans, and other similar debts |          |  |  |
| 4.24   | Mcsi Inc Nonpriority Creditor's Name Po Box 327   | Last 4 digits of account number  When was the debt incurred?   | 2900   | \$200.00 |  |  |
|        | Palos Heights, IL 60463  Number Street City State Zlp Code  Who incurred the debt? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt ls the claim subject to offset?  No               | As of the date you file, the claim is  Contingent Unliquidated Disputed Type of NONPRIORITY unsecured Student loans Obligations arising out of a separeport as priority claims Debts to pension or profit-sharing  | d claim:<br>aration agreement or divorce that you did not                                      |          |  |  |
|        | Yes   | ■ Other. Specify Collection  | 01 Village Of Hazel  |          |  |  |

Case 16-02784 Doc 1 Filed 01/29/16 Entered 01/29/16 15:02:24 Desc Main Document Page 28 of 58

| Debto | Demetria C. Dudley  | Case number (if know)  |  |          |  |
|-------|---|--|--|----------|--|
| 4.25  | Metabank-Ultravx Visa Nonpriority Creditor's Name                             | Last 4 digits of account number                              | 2389   | \$0.00   |  |
|       | 2500 S Minnesota Ave<br>Sioux Falls, SD 57105                                 | When was the debt incurred?                                  | Opened 2/09/09 Last Active 2/01/11           |          |  |
|       | Number Street City State Zlp Code  Who incurred the debt? Check one.          | As of the date you file, the claim i                         |  |          |  |
|       | ■ Debtor 1 only   | Contingent   |  |          |  |
|       | ☐ Debtor 2 only   | ☐ Unliquidated   |  |          |  |
|       | ☐ Debtor 1 and Debtor 2 only  | ☐ Disputed  Type of NONPRIORITY unsecured                    | l claim:                                     |          |  |
|       | ☐ At least one of the debtors and another                                     | Student loans  | rciaiii.                                     |          |  |
|       | ☐ Check if this claim is for a community debt Is the claim subject to offset? | _  | ration agreement or divorce that you did not |          |  |
|       | ■ No  | ☐ Debts to pension or profit-sharin                          | g plans, and other similar debts             |          |  |
|       | ☐ Yes   | Other. Specify Secured C                                     | redit Card                                   |          |  |
| 4.26  | Municollofam  | Last 4 digits of account number                              | 3631   | \$270.00 |  |
|       | Nonpriority Creditor's Name 3348 Ridge Road Lansing, IL 60438                 | When was the debt incurred?                                  | Opened 6/17/14                               |          |  |
|       | Number Street City State Zlp Code   | As of the date you file, the claim i                         | s: Check all that apply                      |          |  |
|       | Who incurred the debt? Check one.   | ☐ Contingent   |  |          |  |
|       | Debtor 1 only   | ☐ Unliquidated   |  |          |  |
|       | Debtor 2 only   | ☐ Disputed   |  |          |  |
|       | ☐ Debtor 1 and Debtor 2 only  | Type of NONPRIORITY unsecured                                | l claim:                                     |          |  |
|       | ☐ At least one of the debtors and another                                     | ☐ Student loans  |  |          |  |
|       | ☐ Check if this claim is for a community debt Is the claim subject to offset? | ☐ Obligations arising out of a separeport as priority claims | ration agreement or divorce that you did not |          |  |
|       | ■ No  | Debts to pension or profit-sharing                           | g plans, and other similar debts             |          |  |
|       | Yes   | Other. Specify Collection                                    | 04 Village Of Olympi                         |          |  |
| 4.27  | The CBE Group   | Last 4 digits of account number                              |  | \$402.00 |  |
|       | Nonpriority Creditor's Name 131 Tower Park Suite 100 P.O. Box 900             | When was the debt incurred?                                  |  |          |  |
|       | Waterloo, IA 50704  |  |  |          |  |
|       | Number Street City State Zlp Code  Who incurred the debt? Check one.          | As of the date you file, the claim i                         | s: Check all that apply                      |          |  |
|       | Debtor 1 only   | ☐ Contingent   |  |          |  |
|       |   | ☐ Unliquidated   |  |          |  |
|       | ☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only                                  | ☐ Disputed  Type of NONPRIORITY unsecured                    | d claim:                                     |          |  |
|       | $\square$ At least one of the debtors and another                             | ☐ Student loans  |  |          |  |
|       | ☐ Check if this claim is for a community debt Is the claim subject to offset? | ☐ Obligations arising out of a separeport as priority claims | ration agreement or divorce that you did not |          |  |
|       | ■ No  | Debts to pension or profit-sharing                           | g plans, and other similar debts             |          |  |
|       | ☐ Yes   | ■ Other. Specify Comed Res                                   | sidentiakl                                   |          |  |
|       |   |  |  |          |  |

Document Page 29 of 58

1/29/16 11:33AM

| Demetria C. Dudley  |  | Case number (if know)                                  |           |
|---|--|--|-----------|
| Title Lenders/dba USA Payday Loan   | Last 4 digits of account number                              | 3241   | \$525.8   |
| Nonpriority Creditor's Name 15943 S Harlem Tiples Perk III 60477                              | When was the debt incurred?                                  |  |           |
| Tinley Park, IL 60477  Number Street City State Zlp Code                                      | As of the date you file, the claim is                        | s: Check all that apply                                |           |
| Who incurred the debt? Check one.   | ☐ Contingent   |  |           |
| Debtor 1 only   | ☐ Unliquidated   |  |           |
| ☐ Debtor 2 only   | Disputed   |  |           |
| ☐ Debtor 1 and Debtor 2 only  | Type of NONPRIORITY unsecured                                | claim:   |           |
| $\square$ At least one of the debtors and another   | ☐ Student loans  |  |           |
| ☐ Check if this claim is for a community debt Is the claim subject to offset?                 | ☐ Obligations arising out of a separeport as priority claims | ration agreement or divorce that you did not           |           |
| ■ No  | Debts to pension or profit-sharing                           | g plans, and other similar debts                       |           |
| Yes   | Other. Specify   |  |           |
| Ultra VX New Millenium  | Last 4 digits of account number                              |  | \$0.0     |
| Nonpriority Creditor's Name<br>6550 S Millrock  | When was the debt incurred?                                  |  | * -       |
| Ste 100   |  |  |           |
| Salt Lake City, UT 84121  Number Street City State Zlp Code                                   | As of the date you file, the claim is                        | : Check all that apply                                 |           |
| Who incurred the debt? Check one.   | _  | 2. Chook an that apply                                 |           |
| ■ Debtor 1 only   | ☐ Contingent   |  |           |
| ☐ Debtor 2 only   | ☐ Unliquidated   |  |           |
| Debtor 1 and Debtor 2 only  | Disputed   |  |           |
| At least one of the debtors and another   | Type of NONPRIORITY unsecured                                | claim:   |           |
| ☐ Check if this claim is for a community debt   | ☐ Student loans  |  |           |
| Is the claim subject to offset?   | ☐ Obligations arising out of a separeport as priority claims | ration agreement or divorce that you did not           |           |
| ■ No  | ☐ Debts to pension or profit-sharing                         | g plans, and other similar debts                       |           |
| Yes   | Other. Specify   |  |           |
| United Auto Credit  | Last 4 digits of account number                              |  | \$0.0     |
| Nonpriority Creditor's Name 3990 Westerly PI Ste 200  | When was the debt incurred?                                  |  |           |
| Newport Beach, CA 92660  Number Street City State Zlp Code  Who incurred the debt? Check one. | As of the date you file, the claim is                        | s: Check all that apply                                |           |
| _   | ☐ Contingent   |  |           |
| Debtor 1 only   | ☐ Unliquidated   |  |           |
| Debtor 2 only   | ☐ Disputed   |  |           |
| ☐ Debtor 1 and Debtor 2 only  | Type of NONPRIORITY unsecured                                | claim:   |           |
| At least one of the debtors and another   | ☐ Student loans  |  |           |
| ☐ Check if this claim is for a community debt Is the claim subject to offset?                 | ☐ Obligations arising out of a separeport as priority claims | ration agreement or divorce that you did not           |           |
| ■ No  | Debts to pension or profit-sharing                           | g plans, and other similar debts                       |           |
| Yes   | Other. Specify   |  |           |
| List Others to Be Notified About a Debt   | That You Already Listed                                      |  |           |
|   | •  | ມ already listed in Parts 1 or 2. For example, if a co | allastian |

On which entry in Part 1 or Part 2 did you list the original creditor?

Name and Address **Afini** 

Line <u>4.16</u> of (*Check one*): 

Part 2 did you list the original creditor?

Line 4.16 of (*Check one*): 

Part 1: Creditors with Priority Unsecured Claims

Page 30 of 58 Document

1/29/16 11:33AM

| Debtor 1 Demetria C. Dudley                        |                                       | Case number (if know)                                 |
|--|---------------------------------------|---|
| P.O. Box 3097                                      |                                       | ■ Part 2: Creditors with Nonpriority Unsecured Claims |
| Bloomington, IL 61702                              | Last 4 digits of account number       | 4395  |
| Name and Address                                   | On which entry in Part 1 or Part 2 di | d you list the original creditor?                     |
| City of Chicago                                    | Line 4.10 of (Check one):             | ☐ Part 1: Creditors with Priority Unsecured Claims    |
| Linbarger Goggan Blair & Sampson<br>P.O. Box 06152 |                                       | Part 2: Creditors with Nonpriority Unsecured Claims   |
| Chicago, IL 60606-0152                             | Last 4 digits of account number       |   |
| Name and Address                                   | On which entry in Part 1 or Part 2 di | d you list the original creditor?                     |
| City of Chicago Corporation                        | Line 4.10 of (Check one):             | ☐ Part 1: Creditors with Priority Unsecured Claims    |
| Counsel Parking Ticket Divison                     |                                       | ■ Part 2: Creditors with Nonpriority Unsecured Claims |
| 161 North LaSalle                                  |                                       |   |
| Chicago, IL 60602                                  | Last 4 digits of account number       |   |

#### Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

|              |     |   |     | Total claim |           |
|--------------|-----|---|-----|-------------|-----------|
|              | 6a. | Domestic support obligations  | 6a. | \$          | 0.00      |
| Total claims |     |   |     |             |           |
| from Part 1  | 6b. | Taxes and certain other debts you owe the government  | 6b. | \$          | 211.38    |
|              | 6c. | Claims for death or personal injury while you were intoxicated  | 6c. | \$          | 0.00      |
|              | 6d. | Other. Add all other priority unsecured claims. Write that amount here.                                 | 6d. | \$          | 0.00      |
|              | 6e. | Total. Add lines 6a through 6d.   | 6e. | \$          | 211.38    |
|              |     |   |     | Total Claim |           |
|              | 6f. | Student loans   | 6f. | \$          | 0.00      |
| Total claims |     |   |     |             |           |
| from Part 2  | 6g. | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | 6g. | \$          | 0.00      |
|              | 6h. | Debts to pension or profit-sharing plans, and other similar debts                                       | 6h. | \$          | 0.00      |
|              | 6i. | Other. Add all other nonpriority unsecured claims. Write that amount here.                              | 6i. | \$          | 38,851.98 |
|              | 6j. | Total. Add lines 6f through 6i.   | 6j. | \$          | 38,851.98 |

Page 31 of 58 Document

1/29/16 11:33AM

| Fill in this inform | mation to identify your  | case:             |             |                       |
|---------------------|--------------------------|-------------------|-------------|-----------------------|
| Debtor 1            | Demetria C. Dudle        | ey                |             |                       |
|                     | First Name               | Middle Name       | Last Name   |                       |
| Debtor 2            |                          |                   |             |                       |
| (Spouse if, filing) | First Name               | Middle Name       | Last Name   |                       |
| United States Ba    | ankruptcy Court for the: | NORTHERN DISTRICT | OF ILLINOIS |                       |
| Case number _       |                          |                   |             |                       |
| (if known)          |                          |                   |             | ☐ Check if this is an |
|                     |                          |                   |             | amended filing        |

## Official Form 106G

## Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
  - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
  - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

| F   | Person or | company with<br>Name, Number, | whom you have the<br>Street, City, State and ZIP | contract or lease | State what the contract or lease is for |
|-----|-----------|-------------------------------|--|-------------------|---|
| 2.1 |           |                               |  |                   |   |
|     | Name      |                               |  |                   | _                                       |
|     | Number    | Street                        |  |                   | _                                       |
|     | City      |                               | State  | ZIP Code          | <del>_</del>                            |
| 2.2 |           |                               |  |                   |   |
| •   | Name      |                               |  |                   |   |
| -   | Number    | Street                        |  |                   | _                                       |
|     | City      |                               | State  | ZIP Code          | _                                       |
| 2.3 | City      |                               | Otate  | Zii Code          |   |
|     | Name      |                               |  |                   | _                                       |
|     | Number    | Street                        |  |                   | _                                       |
|     | City      |                               | State  | ZIP Code          |   |
| 2.4 |           |                               |  |                   |   |
|     | Name      |                               |  |                   | _                                       |
|     | Number    | Street                        |  |                   | _                                       |
| -   | City      |                               | State  | ZIP Code          |   |
| 2.5 |           |                               |  |                   |   |
|     | Name      |                               |  |                   |   |
| -   | Number    | Street                        |  |                   | _                                       |
|     | City      |                               | State  | ZIP Code          | _                                       |

Document Page 32 of 58

| Fill in th                            | is information to identify y  | our case:   |   |   |                      |
|---------------------------------------|---|---|---|---|----------------------|
| Debtor 1                              | Demetria C. D   | oudlev  |   |   |                      |
|                                       | First Name  | Middle Name   | Last Name                                       |   |                      |
| Debtor 2<br>(Spouse if, f             | iling) First Name   | Middle Name   | Last Name                                       |   |                      |
| (Spouse II, I                         | ning) First Name  | ivildale Name   | Last Name                                       |   |                      |
| United S                              | tates Bankruptcy Court for the  | he: NORTHERN DISTRICT   | OF ILLINOIS                                     |   |                      |
| Case nur                              | mber  |   |   |   |                      |
| (if known)                            |   |   |   | ☐ Ch  | eck if this is an    |
|                                       |   |   |   | am  | ended filing         |
| Off: 2:                               | - L Farms 40011   |   |   |   |                      |
|                                       | al Form 106H  |   |   |   |                      |
| Sche                                  | dule H: Your Co   | odebtors  |   |   | 12/15                |
| people ar<br>fill it out,<br>your nam | e filing together, both are<br>and number the entries ir<br>e and case number (if kno | equally responsible for sup<br>the boxes on the left. Attact<br>own). Answer every question | plying correct informa<br>n the Additional Page | as complete and accurate as possibition. If more space is needed, copy to this page. On the top of any Addit          | the Additional Page, |
| 1. Do                                 | you have any codebtors  | ? (If you are filing a joint case,  | do not list either spous                        | e as a codebtor.  |                      |
| ■ No                                  | 0   |   |   |   |                      |
| Ye                                    | -   |   |   |   |                      |
|                                       |   |   |   |   |                      |
|                                       |   | e you lived in a community p<br>iana, Nevada, New Mexico, Pu                                |   | <b>ry?</b> (Community property states and te<br>nington, and Wisconsin.)  | erritories include   |
| 7                                     | ma, camorma, raamo, zoaro   | ,   | iono mao, mondo, mao.                           |   |                      |
| ■ No                                  | o. Go to line 3.  |   |   |   |                      |
| □ Ye                                  | es. Did your spouse, former   | spouse, or legal equivalent liv   | e with you at the time?                         |   |                      |
|                                       |   |   |   |   |                      |
| in lir<br>Forn                        | ne 2 again as a codebtor o  | nly if that person is a guarar  | ntor or cosigner. Make                          | r if your spouse is filing with you. Li<br>sure you have listed the creditor or<br>06G). Use Schedule D, Schedule E/F | Schedule D (Official |
|                                       | Column 1: Your codebtor   |   |   | Column 2: The creditor to whon  | you owe the debt     |
|                                       | Name, Number, Street, City, State   | and ZIP Code  |   | Check all schedules that apply:   | •                    |
| 3.1                                   |   |   |   | Cohodulo D. lino  |                      |
| 3.1                                   | Name  |   |   | □ Schedule D, line □<br>□ Schedule E/F, line  |                      |
|                                       |   |   |   | ☐ Schedule G. line  | <u> </u>             |
|                                       | Number Street   |   |   |   | •                    |
|                                       | City  | State   | ZIP Code  |   |                      |
|                                       |   |   |   |   |                      |
| 3.2                                   |   |   |   | □ Sahadula D. line  |                      |
| 3.2                                   | Name  |   |   | □ Schedule D, line □<br>□ Schedule E/F, line  |                      |
|                                       |   |   |   | Schedule E/F, line  |                      |
|                                       | Number Chart  |   |   |   |                      |
|                                       | Number Street<br>City   | State   | ZIP Code  |   |                      |

Case 16-02784 Doc 1 Filed 01/29/16 Entered 01/29/16 15:02:24 Desc Main Document Page 33 of 58

1/29/16 11:33AM

Fill in this information to identify your case: Debtor 1 Demetria C. Dudley Debtor 2 (Spouse, if filing) United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS Check if this is: Case number (If known) ☐ An amended filing ☐ A supplement showing postpetition chapter 13 income as of the following date: Official Form 1061 MM / DD/ YYYY Schedule I: Your Income 12/15 Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Describe Employment Part 1: Fill in your employment **Debtor 1** Debtor 2 or non-filing spouse information. ☐ Employed Employed If you have more than one job, **Employment status** attach a separate page with □ Not employed □ Not employed information about additional employers. Occupation **Mail Carrier** Include part-time, seasonal, or **Employer's name USPS** self-employed work. Occupation may include student **Employer's address** 7230 171st Street or homemaker, if it applies. Tinley Park, IL 60477 How long employed there? 11 years **Give Details About Monthly Income** Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing

spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

For Debtor 2 or For Debtor 1 non-filing spouse List monthly gross wages, salary, and commissions (before all payroll 4,066.01 N/A 2. 2. deductions). If not paid monthly, calculate what the monthly wage would be. 3. Estimate and list monthly overtime pay. 3. +\$ 0.00 +\$ N/A Calculate gross Income. Add line 2 + line 3. \$ 4,066.01 N/A

Official Form 1061 Schedule I: Your Income page 1

1/29/16 11:33AM

| Debto | or 1        | Demetria C. Dudley  | _          | Case r       | number ( <i>if know</i> | n)         |            |                           |                  |
|-------|-------------|---|------------|--------------|-------------------------|------------|------------|---------------------------|------------------|
|       |             |   |            | For          | Debtor 1                |            |            | Debtor 2 or filing spouse |                  |
|       | Cor         | by line 4 here  | 4.         | \$           | 4,066.0                 | 1          | \$         | N/A                       | _                |
| _     | ·           | *   |            |              | ,                       | _          | · —        |                           | _                |
| 5.    |             | all payroll deductions:   | _          | •            |                         | _          | •          |                           |                  |
|       | 5a.         | Tax, Medicare, and Social Security deductions   | 5a.<br>5b. | \$_<br>\$    | 913.0                   |            | \$         | N/A                       |                  |
|       | 5b.<br>5c.  | Mandatory contributions for retirement plans Voluntary contributions for retirement plans   | 5c.        | \$<br>       | 227.0<br>0.0            | _          | φ          | N/A<br>N/A                | _                |
|       | 5d.         | Required repayments of retirement fund loans  | 5d.        | \$<br>       | 0.0                     |            | Ψ <u> </u> | N/A                       | _                |
|       | 5e.         | Insurance   | 5e.        | \$           | 292.8                   |            | \$         | N/A                       | _                |
|       | 5f.         | Domestic support obligations  | 5f.        | \$_          | 0.0                     | _          | \$         | N/A                       | _                |
|       | 5g.         | Union dues  | 5g.        | \$           | 57.5                    |            | \$         | N/A                       | _                |
|       | 5h.         | Other deductions. Specify:  | 5h         | + \$         | 0.0                     | 0 -        | + \$       | N/A                       | <u> </u>         |
| 6.    | Add         | I the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.  | 6.         | \$           | 1,490.4                 | 5          | \$         | N/A                       | <u> </u>         |
| 7.    | Cal         | culate total monthly take-home pay. Subtract line 6 from line 4.  | 7.         | \$           | 2,575.5                 | 6          | \$         | N/A                       | <u>\</u>         |
| 8.    | List<br>8a. | all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total   |            |              |                         |            |            |                           |                  |
|       |             | monthly net income.   | 8a.        | \$           | 0.0                     | 0          | \$         | N/A                       | <u>.</u>         |
|       | 8b.         | Interest and dividends  | 8b.        | \$           | 0.0                     | 0          | \$         | N/A                       | 1                |
|       | 8c.<br>8d.  | Family support payments that you, a non-filing spouse, or a dependen regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. Unemployment compensation   | 8c.<br>8d. | \$           | 0.0                     |            | \$         | N/A<br>N/A                | _                |
|       | 8e.         | Social Security   | 8e.        | \$           | 0.0                     |            | \$         | N/A                       | _                |
|       | 8f.         | Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: Pension or retirement income | 8f.        | \$<br>\$     | 0.0                     |            | \$         | N/A                       |                  |
|       | 8g.<br>8h.  | Other monthly income. Specify:  | 8g.<br>8h  | · · —        | 0.0                     | <u>0</u> - | ¢          | N/A<br>N/A                | _                |
|       | OII.        | Other monthly income. Specify.  | 011        | - Ψ <u> </u> | 0.0                     |            |            | IN/A                      | <u></u>          |
| 9.    | Add         | all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.  | 9.         | \$           | 0.0                     | 0          | \$         | N/                        | A                |
| 10.   |             | culate monthly income. Add line 7 + line 9.   | 10. \$     |              | 2,575.56 +              | \$_        |            | N/A = \$                  | 2,575.56         |
|       |             | the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.  | L          |              |                         |            |            |                           |                  |
| 11.   | othe<br>Do  | te all other regular contributions to the expenses that you list in Schedule ude contributions from an unmarried partner, members of your household, you er friends or relatives. not include any amounts already included in lines 2-10 or amounts that are not cify:                              | r depe     | ,            | ,                       |            | ,          | Schedule J.<br>11. +\$    | 0.00             |
|       |             | If the amount in the last column of line 10 to the amount in line 11. The reste that amount on the Summary of Schedules and Statistical Summary of Certallies   |            |              |                         |            |            | 12. \$                    | 2,575.56         |
|       |             |   |            |              |                         |            |            | Combi<br>month            | nea<br>ly income |
| 13.   | Do <u>y</u> | you expect an increase or decrease within the year after you file this form No.   | 1?         |              |                         |            |            |                           | ,                |
|       |             | Yes. Explain:   |            |              |                         |            |            |                           |                  |

Official Form 106I Schedule I: Your Income page 2 Case 16-02784 Doc 1 Filed 01/29/16 Entered 01/29/16 15:02:24 Desc Main Page 35 of 58 Document

| Fill in this info            | ormation to identify y                                       | our case:   |  |   |                   |                               |  |
|------------------------------|--|---|--|---|-------------------|-------------------------------|--|
| Debtor 1                     | Demetria C.  | Dudley  |  |   | Check if this is: |                               |  |
| Debtor 2 (Spouse, if filing  |  | <ul> <li>☐ An amended filing</li> <li>☐ A supplement showing postpetition chapter</li> <li>13 expenses as of the following date:</li> </ul> |  |   |                   |                               |  |
| United States E              | Sankruptcy Court for the                                     | : NORTH   | OIS  | MM / DD / YYYY  |                   |                               |  |
| Case number (If known)       |  |   |  |   |                   |                               |  |
| Official                     | Form 106J  |   |  |   |                   |                               |  |
| Schedu                       | ıle J: Your  | <b>Exper</b>  | nses   |   |                   | 12/15                         |  |
| information.<br>number (if k |  | eeded, atta<br>ery questio  | ach another sheet to this                        | re filing together, both are<br>form. On the top of any ac  |                   |                               |  |
|                              | Go to line 2.  Does Debtor 2 live                            | in a sepa   | rate household?                                  |   |                   |                               |  |
| -                            | □ No<br>□ Yes. Debtor 2 mu                                   | ıst file Offic  | sial Form 106J-2, <i>Expense</i> s               | s for Separate Household of                                 | Debtor 2.         |                               |  |
| 2. Do you                    | have dependents?   | □ No  |  |   |                   |                               |  |
| Do not li<br>and Deb         | st Debtor 1<br>otor 2.                                       | Yes.  | Fill out this information for each dependent     | Dependent's relationship to<br>Debtor 1 or Debtor 2         | Dependent's age   | Does dependent live with you? |  |
| Do not s                     | state the  |   |  |   |                   | □ No                          |  |
|                              | ents names.  |   |  | Son   | 7 years           | ■ Yes                         |  |
|                              |  |   |  |   |                   | □ No                          |  |
|                              |  |   |  |   |                   | ☐ Yes                         |  |
|                              |  |   |  |   |                   | □ No                          |  |
|                              |  |   |  |   |                   | ☐ Yes                         |  |
|                              |  |   |  |   |                   | □ No                          |  |
|                              |  |   |  |   |                   | □ Yes                         |  |
| expense                      | expenses include<br>es of people other<br>f and your depende | than _  | l <sub>No</sub><br>l <sub>Yes</sub>              |   |                   | <b>—</b> 165                  |  |
| your ser                     | and your depende   | ,,,,to: —   |  |   |                   |                               |  |
| Estimate you                 | of a date after the  | our bankr   | uptcy filing date unless y                       | ou are using this form as blemental <i>Schedule J</i> , che |                   |                               |  |
|                              | such assistance ar   |   | government assistance i cluded it on Schedule I: |   | Your exp          | enses                         |  |
| (Onicial Fori                | 11 1001. <i>)</i>  |   |  |   | . са. одр         |                               |  |
| 4. The ren                   |  | ship exper  | nses for your residence.                         | nclude first mortgage                                       | 1 \$              | 800.00                        |  |

payments and any rent for the ground or lot.

| 4.  | \$<br>800. | 00 |
|-----|------------|----|
|     |            |    |
|     |            |    |
| 4a. | \$<br>0.0  | 00 |

1/29/16 11:33AM

If not included in line 4:

4a. Real estate taxes Property, homeowner's, or renter's insurance Home maintenance, repair, and upkeep expenses Homeowner's association or condominium dues Additional mortgage payments for your residence, such as home equity loans

page 1

| Deb | tor 1 Demetr                          | ia C. Dudley  | Case number (if known) |            |                          |  |  |
|-----|---------------------------------------|---|------------------------|------------|--------------------------|--|--|
| 6.  | Utilities:                            |   |                        |            |                          |  |  |
|     | 6a. Electricity                       | y, heat, natural gas  | 6a.                    | \$         | 100.00                   |  |  |
|     | 6b. Water, se                         | ewer, garbage collection  | 6b.                    | \$         | 0.00                     |  |  |
|     | 6c. Telephor                          | ne, cell phone, Internet, satellite, and cable services   | 6c.                    | \$         | 150.00                   |  |  |
|     | 6d. Other. Sp                         | pecify:   | 6d.                    | \$         | 0.00                     |  |  |
| 7.  | Food and hou                          | sekeeping supplies  | 7.                     | \$         | 426.90                   |  |  |
| 8.  | Childcare and                         | children's education costs  | 8.                     | \$         | 0.00                     |  |  |
| 9.  | Clothing, laun                        | dry, and dry cleaning   | 9.                     | \$         | 100.00                   |  |  |
| 10. | Personal care                         | products and services   | 10.                    | \$         | 50.00                    |  |  |
| 11. | Medical and de                        | ental expenses  | 11.                    | \$         | 75.00                    |  |  |
| 12. |                                       | Include gas, maintenance, bus or train fare.  | 40                     | Φ.         | 150.00                   |  |  |
| 40  | Do not include                        |   | 12.                    | ·          |                          |  |  |
|     |                                       | , clubs, recreation, newspapers, magazines, and books   | 13.                    | ·          | 0.00                     |  |  |
|     |                                       | ntributions and religious donations   | 14.                    | \$         | 0.00                     |  |  |
| 15. | Insurance.                            | incurrence deducted from your pay or included in lines 4 or 20  |                        |            |                          |  |  |
|     | 15a. Life insu                        | insurance deducted from your pay or included in lines 4 or 20.  | 15a.                   | \$         | 0.00                     |  |  |
|     | 15b. Health in                        |   | 15a.<br>15b.           | ·          | 0.00                     |  |  |
|     | 15c. Vehicle i                        |   | 15b.                   | ·          | 131.00                   |  |  |
|     |                                       | surance. Specify:   | 15d.                   | ·          | 0.00                     |  |  |
| 16  |                                       | include taxes deducted from your pay or included in lines 4 or 20.  | 13u.                   | Ψ          | 0.00                     |  |  |
|     | Specify:                              | • • •   | 16.                    | \$         | 0.00                     |  |  |
| 17. |                                       | lease payments:   |                        | •          |                          |  |  |
|     |                                       | nents for Vehicle 1   | 17a.                   | ·          | 0.00                     |  |  |
|     |                                       | nents for Vehicle 2   | 17b.                   | ·          | 0.00                     |  |  |
|     | 17c. Other. Sp                        |   | 17c.                   | ·          | 0.00                     |  |  |
|     | 17d. Other. Sp                        | •   | 17d.                   | \$         | 0.00                     |  |  |
| 18. |                                       | s of alimony, maintenance, and support that you did not report a  |                        | \$         | 0.00                     |  |  |
| 10  |                                       | n your pay on line 5, <i>Schedule I, Your Income</i> (Official Form 106I)<br>ts you make to support others who do not live with you.  | ).                     | \$         | 0.00                     |  |  |
| 13. | Specify:                              | is you make to support others who do not live with you.   | 19.                    | Ψ          | 0.00                     |  |  |
| 20  |                                       | perty expenses not included in lines 4 or 5 of this form or on Sch  |                        | our Income |                          |  |  |
| 20. |                                       | es on other property  | 20a.                   |            | 0.00                     |  |  |
|     | 20b. Real esta                        | · · ·   | 20b.                   |            | 0.00                     |  |  |
|     |                                       | , homeowner's, or renter's insurance  | 20c.                   |            | 0.00                     |  |  |
|     |                                       | ance, repair, and upkeep expenses   | 20d.                   | ·          | 0.00                     |  |  |
|     |                                       | rner's association or condominium dues  | 20e.                   | · -        | 0.00                     |  |  |
| 21. |                                       |   | 21.                    | ·          | 0.00                     |  |  |
|     | , ,                                   |   |                        | . •        | 0.00                     |  |  |
| 22. |                                       | monthly expenses  |                        |            |                          |  |  |
|     | 22a. Add lines                        | •   |                        | \$         | 1,982.90                 |  |  |
|     | 22b. Copy line                        | 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2   |                        | \$         |                          |  |  |
|     | 22c. Add line 2                       | 2a and 22b. The result is your monthly expenses.  |                        | \$         | 1,982.90                 |  |  |
| 23. | Calculate your                        | monthly net income.   |                        |            |                          |  |  |
|     | 23a. Copy line                        | e 12 (your combined monthly income) from Schedule I.  | 23a.                   | \$         | 2,575.56                 |  |  |
|     | 23b. Copy you                         | ur monthly expenses from line 22c above.  | 23b.                   | -\$        | 1,982.90                 |  |  |
|     |                                       |   |                        |            |                          |  |  |
|     |                                       | your monthly expenses from your monthly income.   | 00-                    | œ.         | 592.66                   |  |  |
|     | The resu                              | It is your monthly net income.  | 23c.                   | \$         | 392.00                   |  |  |
| 24. | For example, do y modification to the | t an increase or decrease in your expenses within the year after you expect to finish paying for your car loan within the year or do you expect your eterms of your mortgage? |                        |            | or decrease because of a |  |  |
|     | ■ No.                                 | Explain here:   |                        |            |                          |  |  |
|     |                                       | I Explain DOLO.   |                        |            |                          |  |  |

Case 16-02784 Doc 1 Filed 01/29/16 Entered 01/29/16 15:02:24 Desc Main Document Page 37 of 58

| Fill in this infor                 | rmation to identify your | case:                    |   |                                      |
|------------------------------------|--------------------------|--------------------------|---|--------------------------------------|
| Debtor 1                           | Demetria C. Dudl         |                          |   |                                      |
|                                    | First Name               | Middle Name              | Last Name   |                                      |
| Debtor 2                           |                          |                          |   |                                      |
| (Spouse if, filing)                | First Name               | Middle Name              | Last Name   |                                      |
| United States Ba                   | ankruptcy Court for the: | NORTHERN DISTRICT        | OF ILLINOIS   |                                      |
| Case number (if known)             |                          |                          |   | ☐ Check if this is an amended filing |
| Official For                       |                          | ın Individual            | Debtor's Schedules  | 12/15                                |
| You must file th<br>obtaining mone | is form whenever you fi  | ile bankruptcy schedules | onsible for supplying correct information.<br>s or amended schedules. Making a false stat<br>kruptcy case can result in fines up to \$250,0 |                                      |

Sign Below

Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms?

■ No

☐ Yes. Name of person

Attach Bankruptcy Petition Preparer's Notice,
Declaration, and Signature (Official Form 119)

1/29/16 11:33AM

Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and that they are true and correct.

X /s/ Demetria C. Dudley
Demetria C. Dudley

Signature of Debtor 1

Date **January 29, 2016** 

X

Signature of Debtor 2

Date

| se 16-02784 | Doc 1 | Filed 01/29/16 | Entered 01/29/16 15:02:24 | Desc Mai |
|-------------|-------|----------------|---------------------------|----------|
|             |       | Document       | Page 38 of 58             |          |

|       |                            | nation to identify you                     |  |   |   |   |
|-------|----------------------------|--|--|---|---|---|
| Del   | otor 1                     | Demetria C. Duo                            | Middle Name  | Last Name   |   |   |
| 1     | otor 2<br>ouse if, filing) | First Name                                 | Middle Name  | Last Name   |   |   |
| Uni   | ted States Bar             | nkruptcy Court for the:                    | NORTHERN DISTRICT (  | OF ILLINOIS   |   |   |
| Cas   | se number                  |  |  |   |   |   |
| 1     | nown)                      |  |  |   | _   | Check if this is an amended filing                    |
|       |                            |  |  |   |   |   |
|       | <u>ficial For</u>          |  | A 66   |   |   |   |
|       |                            |  | Affairs for Individ  |   |   | 12/1  |
| info  | rmation. If m              | ore space is needed                        | , attach a separate sheet to   |   | e equally responsible for su<br>ny additional pages, write yo |   |
| nun   | nber (if known             | n). Answer every que                       | stion.   |   |   |   |
| Pai   | t 1: Give D                | etails About Your Ma                       | arital Status and Where You  | Lived Before  |   |   |
| 1.    | What is your               | current marital state                      | us?  |   |   |   |
|       | ☐ Married                  |  |  |   |   |   |
|       | Not mar                    | ried                                       |  |   |   |   |
| 2.    | During the la              | st 3 years, have you                       | lived anywhere other than  | where you live now?                                   |   |   |
|       | ■ No                       |  |  |   |   |   |
|       | ☐ Yes. List                | t all of the places you                    | lived in the last 3 years. Do n  | ot include where you live no                          | W.  |   |
|       | Debtor 1 Pri               | ior Address:                               | Dates Debtor 1 lived there   | Debtor 2 Prior Ac                                     | Idress:   | Dates Debtor 2<br>lived there                         |
| 3.    | Within the la              | st 8 years, did you e                      | ver live with a spouse or le   | gal equivalent in a commu                             | nity property state or territo                                | ry? (Community propert                                |
| state |                            |  |  |   | Rico, Texas, Washington and N                                 |   |
|       | ■ No                       |  |  |   |   |   |
|       | ☐ Yes. Ma                  | ke sure you fill out Sc                    | hedule H: Your Codebtors (O  | fficial Form 106H).                                   |   |   |
| Pai   | rt 2 Explain               | n the Sources of You                       | ır Income  |   |   |   |
| 4.    | Fill in the tota           | I amount of income yo                      | mployment or from operating ou received from all jobs and a have income that you receive | all businesses, including par                         |   | ndar years?   |
|       | □ No                       |  |  |   |   |   |
|       | Yes. Fill                  | in the details.                            |  |   |   |   |
|       |                            |  | Debtor 1   |   | Debtor 2  |   |
|       |                            |  | Sources of income<br>Check all that apply.   | Gross income<br>(before deductions and<br>exclusions) | Sources of income<br>Check all that apply.                    | Gross income<br>(before deductions<br>and exclusions) |
|       |                            | of current year until<br>d for bankruptcy: | ■ Wages, commissions, bonuses, tips  | \$3,731.93  | ☐ Wages, commissions, bonuses, tips                           |   |
|       |                            |  | ☐ Operating a business   |   | ☐ Operating a business  |   |

Case 16-02784 Doc 1 Filed 01/29/16 Entered 01/29/16 15:02:24 Desc Main Document Page 39 of 58

| Debtor 1 Demetria C. Dudley |       |        |                            | Case number (if known) |  |   |         |                                |                  |   |
|-----------------------------|-------|--------|----------------------------|------------------------|--|---|---------|--------------------------------|------------------|---|
|                             |       |        |                            |                        |  |   |         |                                |                  |   |
|                             |       |        |                            |                        | Debtor 1   |   |         | Debtor 2                       |                  |   |
|                             |       |        |                            |                        | Sources of income<br>Check all that apply.   | Gross income<br>(before deductions a<br>exclusions) | and     | Sources of inco                |                  | Gross income<br>(before deductions<br>and exclusions) |
|                             |       |        | dar year:<br>December :    | 31, 2015 )             | ■ Wages, commissions, bonuses, tips  | \$51,291  | .36     | ☐ Wages, comr<br>bonuses, tips | nissions,        |   |
|                             |       |        |                            |                        | ☐ Operating a business   |   |         | Operating a b                  | usiness          |   |
|                             |       |        | dar year bet<br>December : |                        | ☐ Wages, commissions, bonuses, tips  | \$0   | .00     | ☐ Wages, comr<br>bonuses, tips | nissions,        |   |
|                             |       |        |                            |                        | ☐ Operating a business   |   |         | ☐ Operating a b                | usiness          |   |
| ı                           |       | No     | Fill in the de             | ŭ                      | me from each source separa   | tery. Do not include inc                            | ome ti  | iai you iisteu iii iin         | c <del>4</del> . |   |
|                             |       |        |                            |                        | Debtor 1   |   |         | Debtor 2                       |                  |   |
|                             |       |        |                            |                        | Sources of income Describe below   | Gross income<br>(before deductions a<br>exclusions) | and     | Sources of inco                | ome              | Gross income<br>(before deductions<br>and exclusions) |
|                             | Are e |        | Debtor 1's                 | or Debtor 2'           | Made Before You Filed for<br>s debts primarily consumer<br>ebtor 2 has primarily consu           | debts?  | dehts:  | s are defined in 11            | 1150 810         | 01(8) as "incurred by an                              |
|                             |       | 110.   |                            |                        | personal, family, or househol  |   | dobit   | die deimed in 11               | 0.0.0.3          | or(o) as incurred by air                              |
|                             |       |        | During the No.             | -                      | re you filed for bankruptcy, di  | d you pay any creditor                              | a total | of \$6,225* or mor             | e?               |   |
|                             |       |        |                            | Go to line 7           | •  | -l - 1-1-l -f #0 005*                               |         |                                |                  | the tetal and accordance                              |
|                             |       |        | ☐ Yes                      | paid that cre          | ach creditor to whom you pai<br>editor. Do not include paymer<br>payments to an attorney for the | nts for domestic suppor<br>nis bankruptcy case.     | t oblig | ations, such as ch             | ild support      | and alimony. Also, do                                 |
|                             |       |        | " Subject                  | o adjustment           | on 4/01/16 and every 3 year  | s after that for cases the                          | ea on   | or after the date of           | r adjustmen      | IT.   |
| ı                           |       | Yes.   |                            |                        | r both have primarily consure you filed for bankruptcy, di                                       |   | a total | of \$600 or more?              |                  |   |
|                             |       |        | ■ No.                      | Go to line 7           |  |   |         |                                |                  |   |
|                             |       |        | ☐ Yes                      | include payı           | ach creditor to whom you pai<br>ments for domestic support o<br>for this bankruptcy case.        |   |         |                                |                  |   |
|                             | Cre   | ditor' | s Name and                 | l Address              | Dates of payme   | nt Total amoui                                      |         | Amount you still owe           | Was this p       | payment for   |

Case 16-02784 Doc 1 Filed 01/29/16 Entered 01/29/16 15:02:24 Desc Main Document Page 40 of 58

| Debtor 1 Demetria C. Dudley  |                           | Demetria C. Dudley  | Case number (if known)                                      |  |  |                                 |                                    |
|--|---------------------------|---|---|--|--|---------------------------------|------------------------------------|
|  |                           |   |   |  |  |                                 |                                    |
| 7.   | Inside<br>corpo<br>includ | n 1 year before you filed for bankrupt<br>ers include your relatives; any general parations of which you are an officer, directling one for a business you operate as a port and alimony. | artners; relatives of any genetor, person in control, or ow | eral partners; partnerner of 20% or more | erships of which you of their voting sec | u are a gener<br>urities; and a | ral partner;<br>ny managing agent, |
|  |                           | No<br>Yes. List all payments to an insider  |   |  |  |                                 |                                    |
|  | Insid                     | der's Name and Address  | Dates of payment  | Total amount paid                        | Amount you still owe                     | Reason for                      | this payment                       |
| 8.   | inside<br>Includ          | n 1 year before you filed for bankrupter? de payments on debts guaranteed or cos  |   | ments or transfer a                      | any property on a                        | ccount of a c                   | lebt that benefited an             |
|  |                           | Yes. List all payments to an insider  |   |  |  |                                 |                                    |
|  | Insid                     | ler's Name and Address  | Dates of payment  | Total amount paid                        | Amount you still owe                     |                                 | this payment<br>ditor's name       |
| Pai  | rt 4:                     | Identify Legal Actions, Repossession  | ns, and Foreclosures  |  |  |                                 |                                    |
|  | modifi                    | Il such matters, including personal injury ications, and contract disputes.  No Yes. Fill in the details.   | Nature of the case  | Court or agency                          | ,  | Status of tl                    | ·                                  |
|  | Case                      | number  |   |  |  |                                 |                                    |
| 10.  | Check                     | n 1 year before you filed for bankrupt  A all that apply and fill in the details belo  No  Yes. Fill in the information below.  |   | rty repossessed, f                       | oreclosed, garnis                        | hed, attache                    | d, seized, or levied?              |
|  |                           | litor Name and Address  | Describe the Property                                       |  | Date                                     |                                 | Value of the                       |
|  |                           |   | Explain what happened                                       | l  |  |                                 | property                           |
| <ul> <li>11. Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from accounts or refuse to make a payment because you owed a debt?</li> <li>No</li> <li>Yes. Fill in the details.</li> </ul> |                           |   |   | amounts from your                        |  |                                 |                                    |
|  |                           | litor Name and Address  | Describe the action the                                     | creditor took                            | Date a                                   | action was                      | Amount                             |
| 12.  | court                     | n 1 year before you filed for bankrupt<br>-appointed receiver, a custodian, or a<br>No<br>Yes   |   | rty in the possess                       |  |                                 | efit of creditors, a               |

Case 16-02784 Doc 1 Filed 01/29/16 Entered 01/29/16 15:02:24 Desc Main Document Page 41 of 58

| Debtor 1 Demetria C. Dudley |                                | Demetria C. Dudley   | Case number (if known)   |  |                         |  |
|-----------------------------|--------------------------------|--|--|--|-------------------------|--|
|                             |                                |  |  |  |                         |  |
| Part                        | 5:                             | List Certain Gifts and Contributions   |  |  |                         |  |
|                             | <b>–</b> N                     | No   | ptcy, did you give any gifts with a total  | value of more than \$600 per perso       | on?                     |  |
|                             | □ Y                            | es. Fill in the details for each gift.   |  |  |                         |  |
|                             |                                | with a total value of more than \$600 person   | Describe the gifts   | Dates you gave the gifts                 | Value                   |  |
|                             | Perso<br>Addro                 | on to Whom You Gave the Gift and ess:  |  |  |                         |  |
| 14.                         | _                              | •  | ptcy, did you give any gifts or contribut  | tions with a total value of more tha     | nn \$600 to any charity |  |
|                             | _                              | lo   |  |  |                         |  |
|                             |                                | es. Fill in the details for each gift or co  |  |  |                         |  |
|                             | more<br>Chari                  | or contributions to charities that to than \$600 ity's Name  | tal Describe what you contributed  | Dates you contributed                    | Value                   |  |
|                             | Addr                           | ess (Number, Street, City, State and ZIP Code)   |  |  |                         |  |
| Part                        | 6:                             | List Certain Losses  |  |  |                         |  |
|                             | disast<br>                     | n 1 year before you filed for bankrup<br>ter, or gambling?   | tcy or since you filed for bankruptcy, d   | id you lose anything because of th       | eft, fire, other        |  |
|                             | _                              | es. Fill in the details.   |  |  |                         |  |
|                             |                                |  |  | Data of second                           | Malara of announced     |  |
|                             |                                | the loss occurred  | Describe any insurance coverage for the negative state of the new state of the new state of the amount that insurance has pair the new state of the new state o | d. List loss                             | Value of property lost  |  |
| Part                        | 7:                             | List Certain Payments or Transfers   |  |  |                         |  |
|                             | consu                          | ılted about seeking bankruptcy or p  | tcy, did you or anyone else acting on yo<br>reparing a bankruptcy petition?<br>eparers, or credit counseling agencies for  |  |                         |  |
|                             | ПК                             | No   |  |  |                         |  |
|                             | _                              | es. Fill in the details.   |  |  |                         |  |
|                             |                                |  | Description and value of any pr  | Pote normant                             | Amount of               |  |
|                             | Addre<br>Emai                  | on Who Was Paid<br>ess<br>Il or website address<br>on Who Made the Payment, if Not Yo                              | Description and value of any pr transferred  | operty Date payment or transfer was made | Amount of payment       |  |
|                             | LAW<br>223 \<br>Suit           | on who made the Payment, it Not to<br>OFFICES OF GLENDA J. GRAY<br>West Jackson Blvd.<br>Se 1116<br>Bago, IL 60606 |  | 9/1/2015                                 | \$60.00                 |  |
|                             | 223 V<br>Suite<br>Chic<br>Chic | OFFICES OF GLENDA J. GRAY<br>West Jackson Blvd.<br>e 1116<br>ago, IL 60606<br>ago, IL 60606<br>lawgray@gmail.com   | Filing fees  | 1/28/2016                                | \$140.00                |  |

Debtor 1 Demetria C. Dudley

1/29/16 11:33AM

Case number (if known)

| <ul> <li>17. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to any promised to help you deal with your creditors or to make payments to your creditors? Do not include any payment or transfer that you listed on line 16. </li> <li>No</li> <li>Yes. Fill in the details.</li> </ul> |   |  |                              | rty to anyone who |   |   |
|---|---|--|------------------------------|-------------------|---|---|
|   | Person Who Was Paid Address   | Description and v  | alue of any prop             | perty             | Date payment or transfer was made                       | Amount of payment                             |
| 18.   | 18. Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property transferred in the ordinary course of your business or financial affairs? Include both outright transfers and transfers made as security (such as the granting of a security interest or include gifts and transfers that you have already listed on this statement. No |  |                              |                   |   |   |
|   | Yes. Fill in the details.  Person Who Received Transfer Address  Person's relationship to you   | Description and v property transferr                             |                              |                   | any property or<br>received or debts<br>change          | Date transfer was made                        |
| 19.   | Within 10 years before you filed for bankruptc beneficiary? (These are often called asset-prote No ☐ Yes. Fill in the details.  |  | y property to a s            | self-settled tr   | ust or similar device                                   | of which you are a                            |
|   | Name of trust   | Description and v  | alue of the prop             | erty transferi    | red   | Date Transfer was made                        |
| <b>Par</b> 20.  | Within 1 year before you filed for bankruptcy, sold, moved, or transferred? Include checking, savings, money market, or chouses, pension funds, cooperatives, associated.   | were any financial ac  | counts or instru             | of deposit; s     |   |   |
|   | Yes. Fill in the details.   |  |                              |                   |   |   |
|   |   | ast 4 digits of<br>ccount number                                 | Type of accourant instrument | clo<br>mo         | ite account was<br>osed, sold,<br>oved, or<br>insferred | Last balance<br>before closing or<br>transfer |
| 21.   | Do you now have, or did you have within 1 year cash, or other valuables?  | ar before you filed for  | bankruptcy, an               | y safe deposi     | it box or other depos                                   | itory for securities,                         |
|   | Yes. Fill in the details.   |  |                              |                   |   |   |
|   | Name of Financial Institution<br>Address (Number, Street, City, State and ZIP Code)   | Who else had acc<br>Address (Number, S<br>State and ZIP Code)    |                              | Describe the      | contents  | Do you still have it?                         |
| 22.   | Have you stored property in a storage unit or □  No  Yes. Fill in the details.  | place other than your  | home within 1                | year before y     | ou filed for bankrupt                                   | су  |
|   | Name of Storage Facility Address (Number, Street, City, State and ZIP Code)   | Who else has or it to it? Address (Number, S State and ZIP Code) |                              | Describe the      | contents  | Do you still have it?                         |

Case 16-02784 Doc 1 Filed 01/29/16 Entered 01/29/16 15:02:24 Desc Main Document Page 43 of 58

Debtor 1 Demetria C. Dudley Case number (if known)

| Pa  | rt 9: Identify Property You Hold or Control fo  | r Someone Else  |  |                       |  |  |  |  |
|-----|---|---|--|-----------------------|--|--|--|--|
| 23. | 3. Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone. |   |  |                       |  |  |  |  |
|     | ■ No  |   |  |                       |  |  |  |  |
|     | Yes. Fill in the details.   |   |  |                       |  |  |  |  |
|     | Owner's Name<br>Address (Number, Street, City, State and ZIP Code)  | Where is the property?<br>(Number, Street, City, State and ZIP<br>Code)   | Describe the property                  | Value                 |  |  |  |  |
| Pa  | rt 10: Give Details About Environmental Inform  | nation  |  |                       |  |  |  |  |
| For | the purpose of Part 10, the following definition  | s apply:  |  |                       |  |  |  |  |
|     | Environmental law means any federal, state, or toxic substances, wastes, or material into the regulations controlling the cleanup of these s          | air, land, soil, surface water, groun   | — ·                                    |                       |  |  |  |  |
|     | Site means any location, facility, or property a to own, operate, or utilize it, including disposa  | •   | l law, whether you now own, operate,   | or utilize it or used |  |  |  |  |
|     | Hazardous material means anything an environate hazardous material, pollutant, contaminant, o   |   | ıs waste, hazardous substance, toxic   | substance,            |  |  |  |  |
| Rep | port all notices, releases, and proceedings that  | you know about, regardless of whe   | en they occurred.                      |                       |  |  |  |  |
| 24. | Has any governmental unit notified you that you   | ou may be liable or potentially liabl   | e under or in violation of an environn | nental law?           |  |  |  |  |
|     | ■ No □ Yes. Fill in the details.  |   |  |                       |  |  |  |  |
|     | Name of site<br>Address (Number, Street, City, State and ZIP Code)  | Governmental unit<br>Address (Number, Street, City, State an<br>ZIP Code)   | Environmental law, if you know it      | Date of notice        |  |  |  |  |
| 25. | Have you notified any governmental unit of any release of hazardous material?   |   |  |                       |  |  |  |  |
|     | ■ No □ Yes. Fill in the details.  |   |  |                       |  |  |  |  |
|     | Name of site<br>Address (Number, Street, City, State and ZIP Code)  | Governmental unit<br>Address (Number, Street, City, State an<br>ZIP Code)   | Environmental law, if you know it      | Date of notice        |  |  |  |  |
| 26. | Have you been a party in any judicial or admir  | Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders. |  |                       |  |  |  |  |
|     | ■ No  |   |  |                       |  |  |  |  |
|     | Yes. Fill in the details.   |   |  |                       |  |  |  |  |
|     | Case Title Case Number  | Court or agency Name Address (Number, Street, City, State and ZIP Code)   | Nature of the case                     | Status of the case    |  |  |  |  |
| Pa  | rt 11: Give Details About Your Business or Co   | nnections to Any Business   |  |                       |  |  |  |  |
| 27. | Within 4 years before you filed for bankruptcy  | , did you own a business or have a  | ny of the following connections to an  | y business?           |  |  |  |  |
|     | ☐ A sole proprietor or self-employed in a   | ☐ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time                   |  |                       |  |  |  |  |
|     | ☐ A member of a limited liability compar  | ☐ A member of a limited liability company (LLC) or limited liability partnership (LLP)  |  |                       |  |  |  |  |
|     | ☐ A partner in a partnership  |   | •                                      |                       |  |  |  |  |
|     |   | utive of a corporation  |  |                       |  |  |  |  |
|     | ☐ An owner of at least 5% of the voting or equity securities of a corporation   |   |  |                       |  |  |  |  |

Case 16-02784 Doc 1 Filed 01/29/16 Entered 01/29/16 15:02:24 Desc Main

1/29/16 11:33AM Document Page 44 of 58 Debtor 1 Demetria C. Dudley Case number (if known) No. None of the above applies. Go to Part 12. Yes. Check all that apply above and fill in the details below for each business. **Business Name** Describe the nature of the business **Employer Identification number** Address Do not include Social Security number or ITIN. (Number, Street, City, State and ZIP Code) Name of accountant or bookkeeper Dates business existed 28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties. No ☐ Yes. Fill in the details below. Name **Date Issued** Address (Number, Street, City, State and ZIP Code) Part 12: Sign Below I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. /s/ Demetria C. Dudley Signature of Debtor 2

18 U.S.C. §§ 152, 1341, 1519, and 3571.

Demetria C. Dudley Signature of Debtor 1 Date Date January 29, 2016

Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)?

■ No ☐ Yes

Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?

■ No

☐ Yes. Name of Person . Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

# Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

#### This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

### The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

| Chapter 7: | Liquidation        |
|------------|--------------------|
| \$245      | filing fee         |
| \$75       | administrative fee |
| + \$15     | trustee surcharge  |
| \$335      | total fee          |

1/29/16 11:33AM

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans:

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

1/29/16 11:33AM

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

#### **Chapter 11: Reorganization**

\$1,167 filing fee

+ \$550 administrative fee \$1.717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

#### **Read These Important Warnings**

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

### Chapter 12: Repayment plan for family farmers or fishermen

\$200 filing fee

+ \$75 administrative fee

\$275 total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

# Chapter 13: Repayment plan for individuals with regular income

\$235 filing fee+ \$75 administrative fee\$310 total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

#### Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to:

http://www.uscourts.gov/bkforms/bankruptcy\_forms.html#procedure.

#### Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

#### Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

1/29/16 11:33AM

### Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html.

In Alabama and North Carolina, go to: <a href="http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit">http://www.uscourts.gov/FederalCourts/Bankruptcy/Bankruptcy/BankruptcyResources/ApprovedCredit</a> AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

## UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS

## RIGHTS AND RESPONSIBILITIES AGREEMENT BETWEEN CHAPTER 13 DEBTORS AND THEIR ATTORNEYS

#### (Court-Approved Retention Agreement, Revised as of 4/20/2015)

Chapter 13 gives debtors important rights, such as the right to keep property that could otherwise be lost through repossession or foreclosure, but Chapter 13 also puts burdens on debtors, such as the burden of making complete and truthful disclosures of their financial situation. It is important for debtors who file a Chapter 13 bankruptcy case to understand their rights and responsibilities in bankruptcy. In this connection, the advice of an attorney is often crucial. Debtors are entitled to certain services from their attorneys, but debtors also have responsibilities to their attorneys. In order to assure that debtors and their attorneys understand their rights and responsibilities in the Chapter 13 process, the judges of the Bankruptcy Court for the Northern District of Illinois have approved this agreement, setting out the rights and responsibilities of both debtors in Chapter 13 and their attorneys, including how their attorneys will be paid for their services in the Chapter 13 case. By signing this agreement, debtors and their attorneys accept these responsibilities.

The Bankruptcy Code may require a debtor's attorney to provide the debtor with certain documents and agreements at the start of the representation. The terms of this court-approved agreement take the place of any conflicting provision in an earlier agreement. This agreement cannot be modified in any way by other agreements. Any provision of another agreement between the debtors and the attorney that conflicts with this agreement is void.

#### A. BEFORE THE CASE IS FILED

#### THE DEBTOR AGREES TO:

- 1. Discuss with the attorney the debtor's objectives in filing the case.
- 2. Provide the attorney with full, accurate and timely information, financial and otherwise, including properly documented proof of income.

#### THE ATTORNEY AGREES TO:

- 1. Personally counsel the debtor regarding the advisability of filing either a Chapter 13 or a Chapter 7 case, discuss both procedures (as well as non-bankruptcy options) with the debtor, and answer the debtor's questions.
- 2. Personally explain to the debtor that the attorney is being engaged to represent the debtor on all matters arising in the case, as required by Local Bankruptcy Rule, and explain how and when the attorney's fees and the trustee's fees are determined and paid.
- 3. Personally review with the debtor and sign the completed petition, plan, statements, and schedules, as well as all amendments thereto, whether filed with the petition or later. (The schedules may be initially prepared with the help of clerical or paralegal staff of the attorney's office, but personal attention of the attorney is required for the review and signing.)
- 4. Timely prepare and file the debtor's petition, plan, statements, and schedules.

- 5. Explain to the debtor how, when, and where to make all necessary payments, including both payments that must be made directly to creditors and payments that must be made to the Chapter 13 trustee, with particular attention to housing and vehicle payments.
- 6. Advise the debtor of the need to maintain appropriate insurance.

#### B. AFTER THE CASE IS FILED

#### THE DEBTOR AGREES TO:

- 1. Make the required payments to the trustee and to whatever creditors are being paid directly, or, if required payments cannot be made, to notify the attorney immediately.
- 2. Appear punctually at the meeting of creditors (also called the "341 meeting") with recent proof of income and a picture identification card. (If the identification card does not include the debtor's social security number, the debtor must also bring to the meeting a social security card.) The debtor must be present in time for check-in and when the case is called for the actual examination.
- 3. Notify the attorney of any change in the debtor's address or telephone number.
- 4. Inform the attorney of any wage garnishments or liens or levies on assets that occur or continue after the filing of the case.
- 5. Contact the attorney immediately if the debtor loses employment, has a significant change in income, or experiences any other significant change in financial situation (such as serious illness, marriage, divorce or separation, lottery winnings, or an inheritance).
- 6. Notify the attorney if the debtor is sued or wishes to file a lawsuit (including divorce.)
- 7. Inform the attorney if any tax refunds to which the debtor is entitled are seized or not received when due from the IRS or Illinois Department of Revenue.
- 8. Contact the attorney before buying, refinancing, or selling real property, and before entering into any loan agreement.
- 9. Supply the attorney with copies of all tax returns filed while the case is pending.

#### THE ATTORNEY AGREES TO:

- 1. Advise the debtor of the requirement to attend the meeting of creditors, and notify the debtor of the date, time, and place of the meeting.
- 2. Inform the debtor that the debtor must be punctual and, in the case of a joint filing, that both spouses must appear at the same meeting.
- 3. Provide knowledgeable legal representation for the debtor at the meeting of creditors (in time for check-in and the actual examination) and, unless excused by the trustee, for the confirmation hearing.
- 4. If the attorney will be employing another attorney to attend the 341 meeting or any court hearing, personally explain to the debtor in advance, the role and identity of the other attorney

and provide the other attorney with the file in sufficient time to review it and properly represent the debtor.

- 5. Timely submit to the Chapter 13 trustee properly documented proof of income for the debtor, including business reports for self-employed debtors.
- 6. Timely respond to objections to plan confirmation and, where necessary, prepare, file, and serve an amended plan.
- 7. Timely prepare, file, and serve any necessary statements, amended statements, and schedules and any change of address, in accordance with information provided by the debtor.
- 8. Monitor all incoming case information (including, but not limited to, Order Confirming Plan, Notice of Intent to Pay Claims, and 6-month status reports) for accuracy and completeness. Contact the trustee promptly regarding any discrepancies.
- 9. Be available to respond to the debtor's questions throughout the term of the plan.
- 10. Prepare, file, and serve timely modifications to the plan after confirmation, when necessary, including modifications to suspend, lower, or increase plan payments.
- 11. Prepare, file, and serve necessary motions to buy or sell property and to incur debt.
- 12. Object to improper or invalid claims.
- 13. Timely respond to the Chapter 13 trustee's motions to dismiss the case, such as for payment default, or unfeasibility, and to motions to increase the percentage payment to unsecured creditors.
- 14. Timely respond to motions for relief from stay.
- 15. Prepare, file, and serve all appropriate motions to avoid liens.
- 16. Provide any other legal services necessary for the administration of the case.

#### *C*. TERMINATION OR CONVERSION OF THE CASE AFTER ENTRY OF AN ORDER APPROVING FEES AND EXPENSES

- 1. Approved fees and expenses paid under the provisions set out below are generally not refundable in the event that the case is dismissed prior to its completion, unless the dismissal is due to a failure by the attorney to comply with the duties set out in this agreement. If such a dismissal is due to a failure by the attorney, the court may order a refund of fees on motion by the debtor.
- 2. If the case is dismissed after approval of the fees and expenses but before payment of all allowed fees and expenses, the order entered by the Bankruptcy Court allowing the fees and expenses is not a judgment against the debtor for the unpaid fees and expenses based on contract law or otherwise.
- 3. If the case is converted to a case under chapter 7 after approval of the fees and expenses under this agreement but before the payment of all fees and expenses, the attorney will be entitled to an administrative claim in the chapter 7 case for any unpaid fees and expenses, pursuant to section 726(b) of the Bankruptcy Code, plus any conversion fee the attorney pays on behalf of the debtor.

#### D. RETAINERS AND PREVIOUS PAYMENTS

1. The attorney may receive a retainer or other payment before filing the case but may not receive fees directly from the debtor after the filing of the case. Unless the following provision is checked and completed, any retainer received by the attorney will be treated as a security retainer, to be placed in the attorney's client trust account until approval of a fee application by the court.

□The attorney seeks to have the retainer received by the attorney treated as an advance payment retainer, which allows the attorney to take the retainer into income immediately. The attorney hereby provides the following further information and representations:

- (a) The special purpose for the advance payment retainer and why it is advantageous to the debtor is as follows:
- (b) The retainer will not be held in a client trust account and will become property of the attorney upon payment and will be deposited into the attorney's general account;
- (c) The retainer is a flat fee for the services to be rendered during the chapter 13 case and will be applied for such services without the need for the attorney to keep detailed hourly time records for the specific services performed for the debtor;
- (d) Any portion of the retainer that is not earned or required for expenses will be refunded to the client; and
- (e) The attorney is unwilling to represent the debtor without receiving an advanced payment retainer because of the nature of the chapter 13 case, the fact that the great majority of services for such case are performed prior to its filing, and the risks associated with the representation of debtors in bankruptcy cases in general.
- 2. In any application for compensation the attorney must disclose to the court any fees or other compensation paid by the debtor to the attorney for any reason within the one year before the case filing.

#### E. CONDUCT AND DISCHARGE

- 1. *Improper conduct by the attorney*. If the debtor disputes the sufficiency or quality of the legal services provided or the amount of the fees charged by the attorney, the debtor may file an objection with the court and request a hearing.
- 2. *Improper conduct by the debtor*. If the attorney believes that the debtor is not complying with the debtor's responsibilities under this agreement or is otherwise engaging in improper conduct, the attorney may apply for a court order allowing the attorney to withdraw from the case.
- 3. Discharge of the attorney. The debtor may discharge the attorney at any time.

#### F. ALLOWANCE AND PAYMENT OF ATTORNEYS' FEES AND EXPENSES

- 1. Any attorney retained to represent a debtor in a Chapter 13 case is responsible for representing the debtor on all matters arising in the case unless otherwise ordered by the court. For all of the services outlined above, the attorney will be paid a flat fee of \$3,000.00
- 2. In addition, the debtor will pay the filing fee required in the case of \$310.00
- 3. Before signing this agreement, the attorney has received, \$\overline{0.00}\$ toward the flat fee, leaving a balance due of \$\overline{3,000.00}\$; and \$\overline{0.00}\$ for expenses, leaving a balance due for the filing fee of \$0.00
- 4. In extraordinary circumstances, such as extended evidentiary hearings or appeals, the attorney may apply to the court for additional compensation for these services. Any such application must be accompanied by an itemization of the services rendered, showing the date, the time expended, and the identity of the attorney performing the services. The debtor must be served with a copy of the application and notified of the right to appear in court to object.

| Date: <b>January 29, 2016</b>            |  |
|--|--|
| Signed:                                  |  |
| /s/ Demetria C. Dudley                   | /s/ Glenda J. Gray                     |
| Demetria C. Dudley                       | Glenda J. Gray                         |
|  | Attorney for the Debtor(s)             |
| Debtor(s)                                |  |
| Do not sign this agreement if the amount | s are blank.  Local Bankruptcy Form 23 |

Case 16-02784 Doc 1 Filed 01/29/16 Entered 01/29/16 15:02:24 Desc Main Document Page 54 of 58

1/29/16 11:33AM

B2030 (Form 2030) (12/15)

# **United States Bankruptcy Court Northern District of Illinois**

| _    | 1101   | mern District or immors  |  |                            |            |
|------|--|--|--|----------------------------|------------|
| In r | Demetria C. Dudley   | Debtor(s)  | Case No. Chapter   | 13                         |            |
|      |  | 20001(5)   | Chapter  |                            |            |
|      | DISCLOSURE OF COMPEN   | SATION OF ATTOR  | NEY FOR DE   | CBTOR(S)                   |            |
| 1.   | Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(compensation paid to me within one year before the filing be rendered on behalf of the debtor(s) in contemplation of  | g of the petition in bankruptcy,   | or agreed to be paid   | to me, for services render | ed or to   |
|      | For legal services, I have agreed to accept  |  | \$   | 3,000.00                   |            |
|      | Prior to the filing of this statement I have received  |  | \$   | 0.00                       |            |
|      | Balance Due  |  | \$   | 3,000.00                   |            |
| 2.   | \$140.00 of the filing fee has been paid.  |  |  |                            |            |
| 3.   | The source of the compensation paid to me was:   |  |  |                            |            |
|      | ■ Debtor □ Other (specify):  |  |  |                            |            |
| 4.   | The source of compensation to be paid to me is:  |  |  |                            |            |
|      | ■ Debtor □ Other (specify):  |  |  |                            |            |
| 5.   | ■ I have not agreed to share the above-disclosed compe   | ensation with any other person u   | unless they are mem  | pers and associates of my  | law firm.  |
| 6.   | ☐ I have agreed to share the above-disclosed compensa copy of the agreement, together with a list of the name of the above-disclosed fee, I have agreed to remark. Analysis of the debtor's financial situation, and render b. Preparation and filing of any petition, schedules, state                                    | nes of the people sharing in the nder legal service for all aspects ring advice to the debtor in dete    | compensation is atta<br>s of the bankruptcy c<br>ermining whether to | ched. ase, including:      |            |
|      | <ul> <li>c. Representation of the debtor at the meeting of creditor</li> <li>d. Representation of the debtor in adversary proceedings</li> <li>e. [Other provisions as needed]</li> <li>Negotiations with secured creditors to represent the reaffirmation agreements and application secured creditors on hour</li> </ul> | and other contested bankrupto<br>educe to market value; exe<br>ns as needed; preparation                 | y matters;<br>emption planning                                       | preparation and filing     | g of<br>SC |
| 7.   | By agreement with the debtor(s), the above-disclosed fee   | does not include the following   | service:   |                            |            |
|      |  | CERTIFICATION  |  |                            |            |
| this | I certify that the foregoing is a complete statement of any bankruptcy proceeding.   | agreement or arrangement for p   | payment to me for re   | presentation of the debto  | r(s) in    |
|      | January 29, 2016   | /s/ Glenda J. Gray   | ,  |                            |            |
| _    | Date   | Glenda J. Gray Signature of Attorne Law Office of Glet 223 West Jacksor Chicago, IL 60606 (312) 386-1010 | y<br>nda J. Gray<br>n, Suite 1116                                    | )                          |            |
|      |  | <u>ladylawgray@gma</u><br>Name of law firm   | ail.com  |                            |            |

Case 16-02784 Doc 1 Filed 01/29/16 Entered 01/29/16 15:02:24 Desc Main Document Page 55 of 58

## **United States Bankruptcy Court**Northern District of Illinois

|       |  | Northern District of Illinois             |                  |                           |
|-------|--|---|------------------|---------------------------|
| In re | Demetria C. Dudley                         | Debtor(s)                                 | Case No.         | 13                        |
|       |  | Debioi(s)                                 | Chapter          | 13                        |
|       | VE   | CRIFICATION OF CREDITOR M                 | MATRIX           |                           |
|       |  | Number o                                  | f Creditors:     | 3                         |
|       | The above-named Debtor(s) (our) knowledge. | hereby verifies that the list of credi    | tors is true and | correct to the best of my |
| Date: | January 29, 2016                           | /s/ Demetria C. Dudley Demetria C. Dudley |                  |                           |

Signature of Debtor

Advocate Medical Group 8550 W Bryn Mawr 8th Fl Chicago, IL 60631

Afini P.O. Box 3097 Bloomington, IL 61702

All Brothers Used Cars

Allied Interstate Inc 435 Ford Rd Ste 800 Minneapolis, MN 55426

American Financial Cre 10333 N Meridian St Ste Indianapolis, IN 46290

Asset Acceptance LLC P.O. Box 1630 Warren, MI 48090-2039

Chase Po Box 901003 Columbus, OH 43224

Chase Auto Finance P.O. Box 901076 Fort Worth, TX 76101-2076

City of Chicago 121 N LaSalle - Room 107A Chicago, IL 60602

City of Chicago Linbarger Goggan Blair & Sampson P.O. Box 06152 Chicago, IL 60606-0152 City of Chicago Corporation Counsel Parking Ticket Divison 161 North LaSalle Chicago, IL 60602

CMI 4200 International Pkwy Carrollton, TX 75007

Comcast P.O. Box 3002 Southeastern, PA 19398-3002

Consultants in Pathology P.O. Box 30309 Charleston, SC 29417

Crescent Bank And Trus 5401 Jefferson Hwy Ste D Harahan, LA 70123

Dept Of Education/Neln 121 S 13th St Lincoln, NE 68508

Enhanced Recovery Co L 8014 Bayberry Rd Jacksonville, FL 32256

Escallate LLC P.O. Box 630906 Cincinnati, OH 45253-0906

First Invst Svc/First 5757 Woodway Dr Ste 400 Houston, TX 77057

Fst Premie

GLA Collections P.O. Box 991199 Louisville, KY 40269 Harris & Harris 111 West Jackson Suite 400 Chicago, IL 60604

I C System Inc Po Box 64378 Saint Paul, MN 55164

Illinois Tollway P.O. Box 5201 Lisle, IL 60532-5201

Mcsi Inc Po Box 327 Palos Heights, IL 60463

Metabank-Ultravx Visa 2500 S Minnesota Ave Sioux Falls, SD 57105

Municollofam 3348 Ridge Road Lansing, IL 60438

The CBE Group 131 Tower Park Suite 100 P.O. Box 900 Waterloo, IA 50704

Title Lenders/dba USA Payday Loan 15943 S Harlem Tinley Park, IL 60477

Ultra VX New Millenium 6550 S Millrock Ste 100 Salt Lake City, UT 84121

United Auto Credit 3990 Westerly Pl Ste 200 Newport Beach, CA 92660